

Fill in this information to identify your case:

United States Bankruptcy Court for the:

WESTERN DISTRICT OF WASHINGTON

Case number (if known) 18-41324 Chapter 11

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Puglia Engineering Inc.

2. All other names debtor used in the last 8 years
Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 91-1523796

4. Debtor's address	Principal place of business	Mailing address, if different from principal place of business
	<u>2216 East 11th Street</u> <u>Tacoma, WA 98421</u> Number, Street, City, State & ZIP Code	<u>201 Harris Avenue</u> <u>Bellingham, WA 98225</u> P.O. Box, Number, Street, City, State & ZIP Code
	<u>Pierce</u> County	Location of principal assets, if different from principal place of business <u>Number, Street, City, State & ZIP Code</u>

5. Debtor's website (URL) www.pugliaengineering.com

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify: _____

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☐ Chapter 7
- ☐ Chapter 9

☒ Chapter 11. *Check all that apply:*

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

- ☒ No.
- ☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

- ☒ No
- ☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor	_____	Relationship	_____
District	_____	When	_____
		Case number, if known	_____

11. Why is the case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? _____

☐ It needs to be physically secured or protected from the weather.☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).☐ Other _____

Where is the property? _____

Number, Street, City, State & ZIP Code

Is the property insured?

☐ No☐ Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

☐ 1-49☐ 50-99☐ 100-199☒ 200-999☐ 1,000-5,000☐ 5001-10,000☐ 10,001-25,000☐ 25,001-50,000☐ 50,001-100,000☐ More than 100,000

15. Estimated Assets

☐ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☐ \$1,000,001 - \$10 million☒ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion

16. Estimated liabilities

☐ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☐ \$1,000,001 - \$10 million☒ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion

Debtor **Puglia Engineering Inc.**
Name

Case number (if known) **18-41324**

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **April 17, 2018**
MM / DD / YYYY

X /s/ Neil Turney
Signature of authorized representative of debtor

Title **President**

Neil Turney
Printed name

18. Signature of attorney **X /s/ James L. Day**
Signature of attorney for debtor

Date **April 17, 2018**
MM / DD / YYYY

James L. Day
Printed name

Bush Kornfeld LLP
Firm name

601 Union St., Suite 5000
Seattle, WA 98101-2373
Number, Street, City, State & ZIP Code

Contact phone **(206) 292-2110** Email address **jday@bskd.com**

WSBA 20474
Bar number and State

Fill in this information to identify the case:

Debtor name Puglia Engineering Inc.

United States Bankruptcy Court for the: WESTERN DISTRICT OF WASHINGTON

Case number (if known) 18-41324

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule _____
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on April 17, 2018

X /s/ Neil Turney

Signature of individual signing on behalf of debtor

Neil Turney

Printed name

President

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **Puglia Engineering Inc.**
 United States Bankruptcy Court for the: **WESTERN DISTRICT OF WASHINGTON**
 Case number (if known): **18-41324**

☐ Check if this is an
 amended filing

Official Form 204
Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders
12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
BAE Systems Ship Repair Inc. Attn: Ian T. Graham 1101 Wilson Blvd., Suite 2000 Arlington, VA 22209			Disputed			\$769,000.00
BLAST ONE INTERNATIONAL 2400 LANDMARK WAY COLUMBUS, OH 43219						\$141,420.78
Clyde & Co. RE: Princess Cruise Lines 101 Second Street 24th Floor San Francisco, CA 94105			Disputed			\$803,418.00
FAIRBANKS MORSE ENGINE 7824 COLLECTION CENTER DR CHICAGO, IL 60693			Disputed			\$237,655.79
FASSMER SERVICES AMERICA, LLC 3650 NW 15TH ST LAUDERHILL, FL 33311			Disputed			\$140,273.65
Grow America Fund - Equipment 708 Third Ave. #710 New York, NY 10017		Equipment; Blanket lien on equipment.		\$295,660.00	\$0.00	\$295,660.00

Debtor **Puglia Engineering Inc.**
Name

Case number (if known) **18-41324**

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
IBEW Pac. Coast Pension Fund IBEW Local #6 5 Third Street Suite 525 SAN FRANCISCO, CA 94103-3216			Unliquidated			\$1,128,686.00
IMECO, INC 1401 CARPENTER AVE IRON MOUNTAIN, MI 49801			Disputed			\$205,700.50
MAN DIESEL 1600A BRITTMOORE RD Houston, TX 77043			Disputed			\$372,473.78
MOTOR-SERVICES HUGO STAMP 3190 SW 4TH AVE FT LAUDERDALE, FL 33315			Disputed			\$379,087.43
PETRO CHEM 4403 RUSSELL RD SUITE 108 MUKITEO, WA 98275						\$184,938.50
PORT OF BELLINGHAM 1801 ROEDER AVE PO BOX 1677 BELLINGHAM, WA 98227						\$132,936.91
PORT OF SAN FRANCISCO PO BOX 7862 SAN FRANCISCO, CA 94120-7862			Disputed			\$742,887.40
Princess Cruise Lines, Ltd 24305 Town Center Drive Santa Clarita, CA 91355			Disputed			\$803,418.00
San Francisco Public Utilities #60DRG60D-01 1390 Market Street, 7th Floor SAN FRANCISCO, CA 94102-5408						\$244,456.06

Debtor **Puglia Engineering Inc.**
Name

Case number (if known) **18-41324**

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
SAN FRANCISCO WATER POWER SEWE ATTN: CSB, RETAIL ELECTRIC 525 GOLDEN GATE AVE, 3RD FLOOR SAN FRANCISCO, CA 94102			Disputed			\$254,249.41
SF Public Utilities Commissio #60DRG60D-01 1390 Market Street, 7th Floor SAN FRANCISCO, CA 94102-5408			Disputed			\$244,456.06
SHERWIN WILLIAMS-BELLING HAM 1401 N STATE ST BELLINGHAM, WA 98225						\$131,639.07
WARTSILA DEFENSE, INC 3617 KOPPENS WAY CHESAPEAKE, VA 23323			Disputed			\$410,101.73
Washington State Dept of Revenue Taxpayer Account Admin Division RE: #601-323-390 PO Box 47476 Olympia, WA 98504-7476						\$190,000.00

Fill in this information to identify the case:Debtor name **Puglia Engineering Inc.**United States Bankruptcy Court for the: **WESTERN DISTRICT OF WASHINGTON**Case number (if known) **18-41324**☐ Check if this is an amended filing**Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals****12/15****Part 1: Summary of Assets****1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*..... \$ **0.00****1b. Total personal property:**Copy line 91A from *Schedule A/B*..... \$ **14,267,022.70****1c. Total of all property:**Copy line 92 from *Schedule A/B*..... \$ **14,267,022.70****Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **9,415,349.00****3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **0.00****3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **11,722,903.96****4. Total liabilities**
Lines 2 + 3a + 3b\$ **21,138,252.96**

Fill in this information to identify the case:Debtor name **Puglia Engineering Inc.**United States Bankruptcy Court for the: **WESTERN DISTRICT OF WASHINGTON**Case number (if known) **18-41324**☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****2. Cash on hand****\$200.00****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

**3.1. Washington Federal
Balance as of 3/28/18****Checking****3557****\$53,314.69****3.2. Washington Federal
Balance as of 3/28/18****Checking****4233****\$4,184.40****4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$57,699.09**Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.
☒ Yes Fill in the information below.

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

**7.1. EH Nationhal Bank
Leasing Department
43385 Business Park Dr., Sute 200
Temecula, CA 9259****\$24,322.12**

Debtor Puglia Engineering Inc.
Name

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0

Last 2 months rent

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**
Description, including name of holder of prepayment

ALMA
PO Box 934368
Atlanta, GA 31193-4368

8.1. Prepaid Insurance \$100,370.00

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$124,692.12

Part 3: Accounts receivable

10. **Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.
☒ Yes Fill in the information below.

11. **Accounts receivable**

11a. 90 days old or less: 912,580.65 - 0.00 = \$912,580.65
face amount doubtful or uncollectible accounts

11b. Over 90 days old: 9,549.73 - 0.00 = \$9,549.73
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$922,130.38

Part 4: Investments

13. **Does the debtor own any investments?**

- ☐ No. Go to Part 5.
☒ Yes Fill in the information below.

14. **Mutual funds or publicly traded stocks not included in Part 1**
Name of fund or stock:

15. **Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture**
Name of entity: % of ownership

15.1. San Francisco Ship Repair, Inc. 100% % \$0.00

16. **Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**
Describe:

Debtor Puglia Engineering Inc.
Name

Case number (If known) 18-41324

17. **Total of Part 4.**

Add lines 14 through 16. Copy the total to line 83.

\$0.00

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☐ No. Go to Part 6.
☒ Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials Process parts and supplies that are delivered and immediately installed. The amount changes daily and thus it is not possible to do a meaningful physical inventory. Value is calculated by taking the difference between purchase records showing "received" and what has been billed.		\$0.00		\$0.00
20.	Work in progress Work in progress varies.	N/A	\$1,386,493.86		\$1,386,493.86
21.	Finished goods, including goods held for resale				
22.	Other inventory or supplies				
23.	Total of Part 5. Add lines 19 through 22. Copy the total to line 84.				<u>\$1,386,493.86</u>
24.	Is any of the property listed in Part 5 perishable? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
25.	Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Book value	50000	Valuation method	Current Value	50000
26.	Has any of the property listed in Part 5 been appraised by a professional within the last year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Debtor Puglia Engineering Inc.
Name

Case number (If known) 18-41324

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture See Attachment B39 Value is Net Book Value	\$137,303.44		\$551,498.53
40.	Office fixtures Included in B39.	\$0.00		\$0.00
41.	Office equipment, including all computer equipment and communication systems equipment and software Included in B39.	\$0.00		\$0.00

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.**
Add lines 39 through 42. Copy the total to line 86.

\$551,498.53

44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☐ No
☒ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☐ No
☒ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.
☒ Yes Fill in the information below.

	General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1.	See Attachment B39. Value is Net Book Value.	\$99,354.37		\$106,034.74

48. **Watercraft, trailers, motors, and related accessories** Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

Debtor Puglia Engineering Inc.
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48.1. See Asset Nos. 5268, 5379 and 5380 included in Attachment B39 (Skiff & Trailer - Net Book Value \$4,391.00; Boston Whaler Skiff-net book value \$13,065.64; 32 foot tugboat-net book value \$45,395.06). \$0.00 \$0.00

49. Aircraft and accessories

50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment) See Attachment B39. Value is Net Book Value. \$10,410,711.00 \$11,118,473.98

51. Total of Part 8. \$11,224,508.72
Add lines 47 through 50. Copy the total to line 87.

52. Is a depreciation schedule available for any of the property listed in Part 8?
☐ No
☒ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?
☐ No
☒ Yes

Part 9: Real property

54. Does the debtor own or lease any real property?

- ☐ No. Go to Part 10.
☒ Yes Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1. Fairhaven Shipyard 201 Harris Avenue, Bellingham, WA	Debtor is Tenant	Unknown		Unknown
55.2. Tacoma Production Shop 2216 East 11th Street, Tacoma, WA	Debtor is Tenant	Unknown		Unknown

56. Total of Part 9. \$0.00
Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.
Copy the total to line 88.

Debtor Puglia Engineering Inc.
Name

Case number (If known) 18-41324

57. Is a depreciation schedule available for any of the property listed in Part 9?

- ☒ No
☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.
☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets			
61. Internet domain names and websites <u>www.pugliaengineering.com</u>	<u>Unknown</u>		<u>\$0.00</u>

62. Licenses, franchises, and royalties

63. Customer lists, mailing lists, or other compilations

64. Other intangibles, or intellectual property

65. Goodwill

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☒ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☒ Yes Fill in the information below.

Current value of
debtor's interest

71. Notes receivable
Description (include name of obligor)

Debtor Puglia Engineering Inc.
Name

Case number (If known) 18-41324

Note Receivable from Premier Harvest	87,536.00	-	87,536.00	=	\$0.00
	Total face amount		doubtful or uncollectible amount		

72. **Tax refunds and unused net operating losses (NOLs)**
Description (for example, federal, state, local)

73. **Interests in insurance policies or annuities**

74. **Causes of action against third parties (whether or not a lawsuit has been filed)**

BAE Lawsuit

Unknown

Nature of claim

Amount requested \$0.00

75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed** *Examples: Season tickets, country club membership*

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$0.00

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

☒ No

☐ Yes

Debtor Puglia Engineering Inc.
Name

Case number (If known) 18-41324

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$57,699.09</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$124,692.12</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$922,130.38</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$1,386,493.86</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$551,498.53</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$11,224,508.72</u>	
88. Real property. <i>Copy line 56, Part 9.....></i>		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ <u>\$0.00</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$14,267,022.70</u>	+ 91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$14,267,022.70</u>

In re Puglia Engineering, Inc.

Attachment to Schedule A/B

Question No. 39

Book Asset Detail 1/01/17 - 12/31/17

FYE: 12/31/2017

Asset	*	Property Description	Date In Service	Book Cost	Book Sec 179 Exp	c	Book Sal Value	Book Prior Depreciation	Book Current Depreciation	Book End Depr	Book Net Book Value	Book Method	Book Period
Group: LEASEHOLD IMPROVEMENTS													
1000		CURBS & LANDSCAPING	2/01/97	69,732.00	0.00		0.00	69,732.00	0.00	69,732.00	0.00	S/L	15.0
1001		ELECTRICAL WORK	2/01/97	7,270.00	0.00		0.00	3,612.28	181.75	3,794.03	3,475.97	S/L	39.0
5066		NETWORK WIRING	3/01/99	6,068.00	0.00		0.00	6,068.00	0.00	6,068.00	0.00	S/L	15.0
5067		HEATING THORNE RD	10/01/99	8,062.00	0.00		0.00	8,062.00	0.00	8,062.00	0.00	S/L	15.0
5088		OUTSIDE TABLE	6/01/00	920.00	0.00		0.00	920.00	0.00	920.00	0.00	S/L	5.0
5090		FENCE BACK LOT	6/01/00	1,342.00	0.00		0.00	1,342.00	0.00	1,342.00	0.00	S/L	15.0
5100		TREES	4/01/00	1,063.00	0.00		0.00	1,063.00	0.00	1,063.00	0.00	S/L	15.0
5150		FAIRHAVEN FENCE	12/01/02	5,092.88	0.00		0.00	4,781.71	311.17	5,092.88	0.00	S/L	15.0
5155		FAIRHAVEN BLDG IMPROVEM	12/01/02	4,873.02	0.00		0.00	4,575.25	297.77	4,873.02	0.00	S/L	15.0
5184		GAS METER	2/01/03	3,369.00	0.00		0.00	3,369.00	0.00	3,369.00	0.00	S/L	5.0
5199		MARINE RAILWAY	9/01/04	302,292.00	0.00		0.00	95,596.65	7,751.08	103,347.73	198,944.27	S/L	39.0
5207		BLDG IMPROVEMENTS	12/01/04	27,926.00	0.00		0.00	8,652.27	716.05	9,368.32	18,557.68	S/L	39.0
5208		NEW FIREPLACES	10/01/04	5,580.00	0.00		0.00	1,752.73	143.08	1,895.81	3,684.19	S/L	39.0
5236		RAIL OVERHAUL	1/01/07	178,544.00	0.00		0.00	45,780.50	4,578.05	50,358.55	128,185.45	S/L	39.0
LEASEHOLD IMPROVEMENTS				622,133.90	0.00	de	0.00	255,307.39	13,978.95	269,286.34	352,847.56		
Group: MACHINERY & EQUIPMENT													
2000		ALZMETAL DRILL PRESS	6/10/91	1,172.50	0.00		0.00	1,149.37	0.00	1,149.37	23.13	S/L	7.0
2001		POWER CON WELDER	6/10/91	2,327.50	0.00		0.00	2,281.62	0.00	2,281.62	45.88	S/L	7.0
2002		POWER CON WELDER 300ST	6/10/91	2,327.50	0.00		0.00	2,281.61	0.00	2,281.61	45.89	S/L	7.0
2003		POWER CON WELDER 400SMI	6/10/91	3,277.50	0.00		0.00	3,199.56	0.00	3,199.56	77.94	S/L	7.0
2004		MILLER ARC WELDING POWEF	6/10/91	1,636.24	0.00		0.00	1,603.99	0.00	1,603.99	32.25	S/L	7.0
2005		MILLER ARC WELDING P.S. DI	6/10/91	1,671.34	0.00		0.00	1,638.37	0.00	1,638.37	32.97	S/L	7.0
2006		MILLER ARC WELDING P.S. DI	6/10/91	1,671.34	0.00		0.00	1,638.37	0.00	1,638.37	32.97	S/L	7.0
2007		MILLER ARC WELDING POWEF	6/10/91	1,671.34	0.00		0.00	1,638.37	0.00	1,638.37	32.97	S/L	7.0
2008		MILLER WELDING ARC SOURC	6/10/91	1,671.34	0.00		0.00	1,638.37	0.00	1,638.37	32.97	S/L	7.0
2009		COBRAMATIC WIRE FEEDER (C	6/10/91	1,794.00	0.00		0.00	1,758.65	0.00	1,758.65	35.35	S/L	7.0
2010		ANDERSON PIPE THREADER R	6/10/91	1,810.25	0.00		0.00	1,774.58	0.00	1,774.58	35.67	S/L	7.0
2011		ROCKWELL MODEL 15 DRILL I	6/10/91	2,082.73	0.00		0.00	2,041.65	0.00	2,041.65	41.08	S/L	7.0
2012		MILLER TB 250G POWER GENE	6/10/91	3,438.05	0.00		0.00	3,370.27	0.00	3,370.27	67.78	S/L	7.0
2013		MILLER TB POWER GENERATC	6/10/91	3,438.05	0.00		0.00	3,370.27	0.00	3,370.27	67.78	S/L	7.0
2014		MILLER TRAILBLAZER P220G-I	6/10/91	3,438.05	0.00		0.00	3,370.27	0.00	3,370.27	67.78	S/L	7.0
2015		MILLER TRAILBLAZER POWER	6/10/91	3,438.05	0.00		0.00	3,370.27	0.00	3,370.27	67.78	S/L	7.0
2016		MILLER VIII-2 ARC WELDING F	6/10/91	11,955.75	0.00		0.00	11,720.03	0.00	11,720.03	235.72	S/L	7.0
2017		WORTHINGTON STATIONARY	6/10/91	15,600.00	0.00		0.00	15,315.75	0.00	15,315.75	284.25	S/L	7.0
2018		MITSUBISHI FORKLIFT	6/10/91	9,457.00	0.00		0.00	9,270.56	0.00	9,270.56	186.44	S/L	7.0
2019		AIRCO TRACK BURNERS	6/10/91	1,501.77	0.00		0.00	1,472.27	0.00	1,472.27	29.50	S/L	7.0
2020		POW CON WELDER	6/10/91	2,327.50	0.00		0.00	2,281.65	0.00	2,281.65	45.85	S/L	7.0
2021		POW CON WELDER 220	6/10/91	2,327.50	0.00		0.00	2,281.65	0.00	2,281.65	45.85	S/L	7.0
2022		ROCKWELL TABLE SAW	1/01/92	485.00	0.00		0.00	485.00	0.00	485.00	0.00	S/L	7.0
2023		MILLER GOLDSTAR 4-- SS DC V	1/01/92	1,499.90	0.00		0.00	1,499.90	0.00	1,499.90	0.00	S/L	7.0
2024		AIRCO TRACK BURNER	1/01/92	1,857.55	0.00		0.00	1,857.55	0.00	1,857.55	0.00	S/L	7.0
2025		AIRCO TRACK BURNER	1/01/92	1,857.55	0.00		0.00	1,857.55	0.00	1,857.55	0.00	S/L	7.0
2026		NORDSON HEATED SPRAY PU	7/27/93	1,650.00	0.00		165.00	1,650.00	0.00	1,650.00	0.00	S/L	7.0
2027		IRONWORKER MODEL 6509 S/S	2/08/93	11,065.58	0.00		1,106.56	11,065.58	0.00	11,065.58	0.00	S/L	7.0
2028		POWERTOOLS	3/28/93	409.64	0.00		40.97	409.64	0.00	409.64	0.00	S/L	7.0
2029		PORTABLE GENERATOR	3/12/93	1,333.65	0.00		0.00	1,333.65	0.00	1,333.65	0.00	S/L	7.0

Book Asset Detail 1/01/17 - 12/31/17

FYE: 12/31/2017

Asset	* Property Description	Date In Service	Book Cost	Book Sec 179 Exp c	Book Sal Value	Book Prior Depreciation	Book Current Depreciation	Book End Depr	Book Net Book Value	Book Method	Book Period
Group: MACHINERY & EQUIPMENT (continued)											
2030	LARGE FAN 1/2 HP 115 V	5/17/93	150.15	0.00	0.00	150.15	0.00	150.15	0.00	S/L	7.0
2031	PNEUMATIC ROUND POLISHER	5/17/93	158.11	0.00	0.00	158.11	0.00	158.11	0.00	S/L	7.0
2032	POLISHER ROUND	5/17/93	158.11	0.00	0.00	158.11	0.00	158.11	0.00	S/L	7.0
2033	THREADING SET W/ INSERTS P	5/17/93	161.20	0.00	0.00	161.20	0.00	161.20	0.00	S/L	7.0
2034	MILWAUKEE SUPER SAWZILL	5/17/93	169.00	0.00	0.00	169.00	0.00	169.00	0.00	S/L	7.0
2035	MILWAUKEE SUPER SAWZILL	5/17/93	169.00	0.00	0.00	169.00	0.00	169.00	0.00	S/L	7.0
2036	MILWAUKEE SUPER SAWZILL	5/17/93	171.60	0.00	0.00	171.60	0.00	171.60	0.00	S/L	7.0
2037	STRIP HEATER (WATER TIGHT	5/17/93	247.00	0.00	0.00	247.00	0.00	247.00	0.00	S/L	7.0
2038	STRIP HEATER (WATER TIGHT	5/17/93	247.00	0.00	0.00	247.00	0.00	247.00	0.00	S/L	7.0
2039	STRIP HEATER (WATER TIGHT	5/17/93	247.00	0.00	0.00	247.00	0.00	247.00	0.00	S/L	7.0
2040	STRIP HEATER (WATER TIGHT	5/17/93	247.00	0.00	0.00	247.00	0.00	247.00	0.00	S/L	7.0
2041	ONE AC	5/17/93	260.00	0.00	0.00	260.00	0.00	260.00	0.00	S/L	7.0
2042	STRIP HEATER (NON-WATER T	5/17/93	328.25	0.00	0.00	328.25	0.00	328.25	0.00	S/L	7.0
2043	DRILL PRESS	5/17/93	362.05	0.00	0.00	362.05	0.00	362.05	0.00	S/L	7.0
2044	ALLIED 2.5 TON ENGINE LIFT	5/17/93	541.50	0.00	0.00	541.50	0.00	541.50	0.00	S/L	7.0
2045	ALLIED HYDRAULIC SERVICE	5/17/93	568.75	0.00	0.00	568.75	0.00	568.75	0.00	S/L	7.0
2046	(6) 1-TON MANUAL CHAIN HOI	5/17/93	619.46	0.00	0.00	619.46	0.00	619.46	0.00	S/L	7.0
2047	VAN AIR DRYER D-8 W/O 5441	5/17/93	682.50	0.00	0.00	682.50	0.00	682.50	0.00	S/L	7.0
2048	JET 14" WOOD/ALBUM BAND S	5/17/93	973.75	0.00	0.00	973.75	0.00	973.75	0.00	S/L	7.0
2049	HOBART WIRE FEEDER	5/17/93	975.00	0.00	0.00	975.00	0.00	975.00	0.00	S/L	7.0
2050	HOBART WIRE FEEDER CC/CV	5/17/93	975.00	0.00	0.00	975.00	0.00	975.00	0.00	S/L	7.0
2051	HOBART WIRE FEEDER CC/CV	5/17/93	975.00	0.00	0.00	975.00	0.00	975.00	0.00	S/L	7.0
2052	HOBART WIRE FEEDER CC/CV	5/17/93	975.00	0.00	0.00	975.00	0.00	975.00	0.00	S/L	7.0
2053	HOBART WIRE FEEDER HEFTY	5/17/93	975.00	0.00	0.00	975.00	0.00	975.00	0.00	S/L	7.0
2054	HOBART WIRE FEEDER HEFTY	5/17/93	975.00	0.00	0.00	975.00	0.00	975.00	0.00	S/L	7.0
2055	HOBART WIRE FEEDER HEFTY	5/17/93	975.00	0.00	0.00	975.00	0.00	975.00	0.00	S/L	7.0
2056	SANDBLASTER ABEC INDUSTF	5/17/93	1,192.75	0.00	0.00	1,192.75	0.00	1,192.75	0.00	S/L	7.0
2057	MILLER GOLDSTAR 400 SS DC	5/17/93	1,221.35	0.00	0.00	1,221.35	0.00	1,221.35	0.00	S/L	7.0
2058	MILLER GOLDSTAR 400 SS DC	5/17/93	1,221.35	0.00	0.00	1,221.35	0.00	1,221.35	0.00	S/L	7.0
2059	AIRCO TRACK BURNER (PURC)	5/17/93	1,496.95	0.00	0.00	1,496.95	0.00	1,496.95	0.00	S/L	7.0
2060	AIRCO TRACK BURNER (PURC)	5/17/93	1,496.95	0.00	0.00	1,496.95	0.00	1,496.95	0.00	S/L	7.0
2061	HYDRAULIC POWER PIPE BENI	8/31/94	3,500.00	0.00	350.00	3,500.00	0.00	3,500.00	0.00	S/L	7.0
2063	RAMCO METAL CUTTING BAN	7/25/94	1,000.00	0.00	0.00	1,000.00	0.00	1,000.00	0.00	S/L	5.0
2064	RAMCO 50 TON PRESS	7/25/94	900.00	0.00	0.00	900.00	0.00	900.00	0.00	S/L	5.0
2065	GRINDER, TOOL POST, VISES, 1	11/08/94	581.58	0.00	58.16	581.58	0.00	581.58	0.00	S/L	7.0
2066	VARIOUS TOOLS	11/30/94	703.30	0.00	70.33	703.30	0.00	703.30	0.00	S/L	7.0
2067	SCOTCHMAN IRONWORKER	12/16/94	70.60	0.00	7.06	70.60	0.00	70.60	0.00	S/L	7.0
2068	SBORING BAR SET WITH INSEF	12/15/94	186.42	0.00	0.00	186.42	0.00	186.42	0.00	S/L	5.0
2069	OUTSIDE MICROMETER SET 0-	12/15/94	193.44	0.00	0.00	193.44	0.00	193.44	0.00	S/L	5.0
2070	OUTSIDE MICROMETER SET 6-	12/15/94	323.65	0.00	0.00	323.65	0.00	323.65	0.00	S/L	5.0
2071	ANGLE GRINDER, DRILL VISE	12/29/94	493.64	0.00	49.36	493.64	0.00	493.64	0.00	S/L	7.0
2072	ANGLE DRILLS	12/28/94	295.65	0.00	29.57	295.65	0.00	295.65	0.00	S/L	7.0
2073	LINCOLN WIRE FEEDER LN 25	3/27/95	1,200.00	0.00	0.00	1,200.00	0.00	1,200.00	0.00	200DB	7.0
2074	POW CON WELDER	3/27/95	2,133.00	0.00	0.00	2,133.00	0.00	2,133.00	0.00	200DB	7.0
2075	POW CON WELDER	3/27/95	2,133.00	0.00	0.00	2,133.00	0.00	2,133.00	0.00	200DB	7.0
2076	POW CON WELDER	3/27/95	2,133.00	0.00	0.00	2,133.00	0.00	2,133.00	0.00	200DB	7.0
2077	POW CON WELDER	3/27/95	2,133.00	0.00	0.00	2,133.00	0.00	2,133.00	0.00	200DB	7.0
2078	HALLIDIE PED GRINDER	5/11/95	458.57	0.00	0.00	458.57	0.00	458.57	0.00	S/L	7.0
2079	WELD SHOP STAKE TABLE	5/11/95	809.25	0.00	0.00	809.25	0.00	809.25	0.00	S/L	7.0

Book Asset Detail 1/01/17 - 12/31/17

FYE: 12/31/2017

Asset	*	Property Description	Date In Service	Book Cost	Book Sec 179 Exp c	Book Sal Value	Book Prior Depreciation	Book Current Depreciation	Book End Depr	Book Net Book Value	Book Method	Book Period
Group: MACHINERY & EQUIPMENT (continued)												
2080		US PEDISTAL GRINDER 10"	5/11/95	485.55	0.00	0.00	485.55	0.00	485.55	0.00	S/L	7.0
2081		FARREK 200 TON PRESS BRAK	5/11/95	4,855.50	0.00	0.00	4,855.50	0.00	4,855.50	0.00	S/L	7.0
2082		DAVIS/WELLS BAND SAW 20"	5/11/95	863.20	0.00	0.00	863.20	0.00	863.20	0.00	S/L	7.0
2083		APEX DISK SANDER	5/11/95	755.30	0.00	0.00	755.30	0.00	755.30	0.00	S/L	7.0
2084		LATHE W/20" SWING	4/25/95	2,104.05	0.00	0.00	2,104.05	0.00	2,104.05	0.00	S/L	7.0
2085		4 - 146" DIES	5/23/95	2,137.25	0.00	0.00	2,137.25	0.00	2,137.25	0.00	S/L	7.0
2086		101-1/2" DIE	5/23/95	293.87	0.00	0.00	293.87	0.00	293.87	0.00	S/L	7.0
2087		SSR-500H-AAH9 133HP ROTARY	5/23/95	2,671.55	0.00	0.00	2,671.55	0.00	2,671.55	0.00	200DB	7.0
2088		ELECTRIC FAN, BAG BLAST PC	6/20/95	1,082.00	0.00	0.00	1,082.00	0.00	1,082.00	0.00	S/L	7.0
2090		RADIUS SP10 UHF 2WT/ICH	5/30/95	525.00	0.00	0.00	525.00	0.00	525.00	0.00	S/L	7.0
2091		TACOMA STEET - 2 PL12120480	4/28/95	5,059.20	0.00	0.00	5,059.20	0.00	5,059.20	0.00	S/L	7.0
2092		VERTICAL MILLING MACHINE	8/30/95	2,750.00	0.00	0.00	2,750.00	0.00	2,750.00	0.00	S/L	7.0
2093		BLAST BOOTH	1/01/98	100,000.00	0.00	0.00	100,000.00	0.00	100,000.00	0.00	S/L	10.0
2094		PORTABLE TELEPHONES (2)	8/15/95	525.00	0.00	0.00	525.00	0.00	525.00	0.00	S/L	7.0
2095		FREE AIR PUMP & RESPIRATOR	10/24/95	849.50	0.00	0.00	849.50	0.00	849.50	0.00	S/L	7.0
2096		HOLLO BLAST & CENTERING C	10/11/95	777.96	0.00	0.00	777.96	0.00	777.96	0.00	S/L	7.0
2097		CUT QUICK 12 CUT-OFF SAW	5/15/96	948.23	0.00	0.00	948.23	0.00	948.23	0.00	S/L	7.0
2098		SULLAIR USED AIR COMPRESS	6/15/96	5,500.00	0.00	0.00	5,500.00	0.00	5,500.00	0.00	S/L	7.0
2099		WELDING FUME EXTRACTOR	6/15/96	1,000.00	0.00	0.00	1,000.00	0.00	1,000.00	0.00	S/L	7.0
2100		HYSTER FORKLIFT	6/15/96	6,000.00	0.00	0.00	6,000.00	0.00	6,000.00	0.00	S/L	7.0
2101		#2 REYSEATER	6/15/96	500.00	0.00	0.00	500.00	0.00	500.00	0.00	S/L	7.0
2102		RADIAL AIRCO DRILL	6/15/96	1,850.00	0.00	0.00	1,850.00	0.00	1,850.00	0.00	S/L	7.0
2103		C CLAMPS	6/15/96	905.00	0.00	0.00	905.00	0.00	905.00	0.00	S/L	7.0
2104		MILWAUKEE ELECTROMAGNE	6/15/96	664.66	0.00	0.00	664.66	0.00	664.66	0.00	S/L	7.0
2105		DIESEL POWERED WELDING M	6/15/96	3,531.96	0.00	0.00	3,531.96	0.00	3,531.96	0.00	S/L	7.0
2106		DIESEL POWERED WELDING M	6/15/96	2,990.96	0.00	0.00	2,990.96	0.00	2,990.96	0.00	S/L	7.0
2107		METAL GANG BOXES	6/15/96	908.09	0.00	0.00	908.09	0.00	908.09	0.00	S/L	7.0
2109		10 TON BRIDGE CRANE	9/15/96	23,175.00	0.00	0.00	23,175.00	0.00	23,175.00	0.00	S/L	7.0
2110		NARROW AISLE ELECTRIC FOR	9/15/96	3,200.00	0.00	0.00	3,200.00	0.00	3,200.00	0.00	S/L	7.0
2111		SHELVING	9/15/96	600.00	0.00	0.00	600.00	0.00	600.00	0.00	S/L	7.0
2112		QTY (4) 5'x5' WAFFLE TABLES	9/15/96	1,350.00	0.00	0.00	1,350.00	0.00	1,350.00	0.00	S/L	7.0
2113		HEFTY CC/CV WIRE FEEDERS	8/20/96	952.56	0.00	0.00	952.56	0.00	952.56	0.00	S/L	7.0
2114		HEFTY CC/CV WIRE FEEDERS	8/20/96	952.56	0.00	0.00	952.56	0.00	952.56	0.00	S/L	7.0
2115		HEFTY CC/CV WIRE FEEDERS	8/20/96	952.56	0.00	0.00	952.56	0.00	952.56	0.00	S/L	7.0
2116		HEFTY CC/CV WIRE FEEDERS	8/20/96	952.56	0.00	0.00	952.56	0.00	952.56	0.00	S/L	7.0
2117		400SMT WELD MACHINE	8/20/96	2,489.40	0.00	0.00	2,489.40	0.00	2,489.40	0.00	S/L	7.0
2118		400SMT WELD MACHINE	8/20/96	2,489.40	0.00	0.00	2,489.40	0.00	2,489.40	0.00	S/L	7.0
2119		400SMT WELD MACHINE	8/20/96	2,489.40	0.00	0.00	2,489.40	0.00	2,489.40	0.00	S/L	7.0
2120		400SMT WELD MACHINE	8/20/96	2,489.40	0.00	0.00	2,489.40	0.00	2,489.40	0.00	S/L	7.0
2121		400SMT WELD MACHINE	8/20/96	2,489.40	0.00	0.00	2,489.40	0.00	2,489.40	0.00	S/L	7.0
2122		8" Super Spacer Steel Chuck	10/01/96	649.54	0.00	0.00	649.54	0.00	649.54	0.00	S/L	7.0
2123		Various Tools & Equipment	10/01/96	18,264.81	0.00	0.00	18,264.81	0.00	18,264.81	0.00	S/L	7.0
2124		Sandblast Cabinet	11/01/96	800.00	0.00	0.00	800.00	0.00	800.00	0.00	S/L	7.0
2125		MILLING MACHINE AND SHAP	8/01/97	9,372.00	9,372.00	0.00	9,372.00	0.00	9,372.00	0.00	S/L	5.0
2126		WELDER- WA	5/01/97	701.00	701.00	0.00	701.00	0.00	701.00	0.00	S/L	5.0
2127		Crane Steel	6/01/98	4,066.00	0.00	0.00	4,066.00	0.00	4,066.00	0.00	S/L	5.0
2128		Small Paint Booth	12/01/98	5,766.00	0.00	0.00	5,766.00	0.00	5,766.00	0.00	S/L	5.0
2129		Computer Wiring	3/01/98	1,260.00	0.00	0.00	1,260.00	0.00	1,260.00	0.00	S/L	5.0
2130		6 Gang Boxes	11/01/98	36,556.00	0.00	0.00	36,556.00	0.00	36,556.00	0.00	S/L	5.0

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Asset *	Property Description	Date In Service	Book Cost	Book Sec 179 Exp c	Book Sal Value	Book Prior Depreciation	Book Current Depreciation	Book End Depr	Book Net Book Value	Book Method	Book Period
Group: MACHINERY & EQUIPMENT (continued)											
2131 *	Lathe	3/01/98	3,502.00	0.00	0.00	3,502.00	0.00	3,502.00	0.00	S/L	5.0
2132	Welding Machines	4/01/98	6,011.00	0.00	0.00	6,011.00	0.00	6,011.00	0.00	S/L	5.0
2144	Koehring Lorain LCD-150 Crane	6/01/98	32,500.00	0.00	0.00	32,500.00	0.00	32,500.00	0.00	S/L	5.0
2154	ESAB L1 IF400 AMP Power Supply	11/01/98	950.00	0.00	0.00	950.00	0.00	950.00	0.00	S/L	5.0
2155	Powcon 300 AMP Power Supply	11/01/98	500.00	0.00	0.00	500.00	0.00	500.00	0.00	S/L	5.0
2158	Tool Boxes w/ Pneumatic Tool	11/01/98	6,000.00	0.00	0.00	6,000.00	0.00	6,000.00	0.00	S/L	5.0
5031	WIRE 1125 THORNE ROAD	12/01/98	1,572.00	0.00	0.00	1,572.00	0.00	1,572.00	0.00	200DB	7.0
5032	FREIGHT ON TRAILER	12/01/98	700.00	0.00	0.00	700.00	0.00	700.00	0.00	200DB	7.0
5042	COLEMAN GENERATOR	3/01/99	530.00	0.00	0.00	530.00	0.00	530.00	0.00	S/L	5.0
5043	CRANE ADDITIONS	5/01/99	2,981.00	0.00	0.00	2,981.00	0.00	2,981.00	0.00	S/L	5.0
5044	CAL PAC POWER UNIT	4/01/99	1,206.00	0.00	0.00	1,206.00	0.00	1,206.00	0.00	S/L	5.0
5045	PARTS CLEANER	5/01/99	2,800.00	0.00	0.00	2,800.00	0.00	2,800.00	0.00	S/L	5.0
5048	FORKLIFT	7/01/99	6,938.00	0.00	0.00	6,938.00	0.00	6,938.00	0.00	S/L	7.0
5050	4 MILLERS	8/01/99	9,280.00	0.00	0.00	9,280.00	0.00	9,280.00	0.00	S/L	5.0
5051	ASST. TOOLS	10/01/99	6,391.00	0.00	0.00	6,391.00	0.00	6,391.00	0.00	S/L	5.0
5052	HEATERS/BLOWERS	10/01/99	2,450.00	0.00	0.00	2,450.00	0.00	2,450.00	0.00	S/L	5.0
5069	NATCO DRILL PRESS	4/01/00	7,500.00	0.00	0.00	7,500.00	0.00	7,500.00	0.00	S/L	5.0
5070	KASE MISC MACHINERY	7/01/00	1,225.00	0.00	0.00	1,225.00	0.00	1,225.00	0.00	S/L	3.0
5071	MAN LIFT	8/01/00	4,000.00	0.00	0.00	4,000.00	0.00	4,000.00	0.00	S/L	3.0
5078	GENERATOR	11/01/00	10,505.00	0.00	0.00	10,505.00	0.00	10,505.00	0.00	S/L	5.0
5098	HI WELDING EQUIPMENT	11/01/00	30,682.00	0.00	0.00	30,682.00	0.00	30,682.00	0.00	S/L	5.0
5099	FREIGHT TO HI	11/01/00	4,491.00	0.00	0.00	4,491.00	0.00	4,491.00	0.00	S/L	3.0
5111	SULLAIR COMPRESSOR	8/01/01	3,666.00	0.00	0.00	3,666.00	0.00	3,666.00	0.00	S/L	5.0
5113	GRAZIANO LATHE	8/01/01	10,697.00	0.00	0.00	10,697.00	0.00	10,697.00	0.00	S/L	5.0
5114	4 TON SHOP CRANE	12/01/01	3,100.00	0.00	0.00	3,100.00	0.00	3,100.00	0.00	S/L	5.0
5115	BRIDGEPORT MILL	11/01/01	2,825.00	0.00	0.00	2,825.00	0.00	2,825.00	0.00	S/L	5.0
5116	COMPRESSOR	9/01/01	2,252.00	0.00	0.00	2,252.00	0.00	2,252.00	0.00	S/L	5.0
5122	1983 TRAILER & WELDER	11/01/01	1,736.00	0.00	0.00	1,736.00	0.00	1,736.00	0.00	S/L	5.0
5123	AUTOMOTIVE LIFT	12/01/01	2,170.00	0.00	0.00	2,170.00	0.00	2,170.00	0.00	S/L	5.0
5125	CLARKE 5200# FORK LIFT	12/01/01	4,000.00	0.00	0.00	4,000.00	0.00	4,000.00	0.00	S/L	5.0
5126	6 EA MILLER 194890 WELDERS	12/01/01	5,937.00	0.00	0.00	5,937.00	0.00	5,937.00	0.00	S/L	5.0
5128	HORIZONTAL BORING MILL	12/15/01	4,996.50	0.00	0.00	4,996.50	0.00	4,996.50	0.00	S/L	5.0
5129	CANOPY	12/01/01	5,020.00	0.00	0.00	5,020.00	0.00	5,020.00	0.00	S/L	5.0
5130	DRY DOCK	11/01/02	400,000.00	0.00	0.00	400,000.00	0.00	400,000.00	0.00	S/L	10.0
5132	BARGE CRANE	11/01/02	100,000.00	0.00	0.00	100,000.00	0.00	100,000.00	0.00	S/L	10.0
5133	FLOOR CRANE	6/01/02	2,545.41	0.00	0.00	2,545.41	0.00	2,545.41	0.00	S/L	5.0
5134	BLAST BOOTH	11/01/02	19,484.00	0.00	0.00	19,484.00	0.00	19,484.00	0.00	S/L	5.0
5135	PAINT SPRAYER	12/01/02	3,885.00	0.00	0.00	3,885.00	0.00	3,885.00	0.00	S/L	5.0
5136	DRY DOCK EQUIPMENT	11/01/02	36,643.00	0.00	0.00	36,643.00	0.00	36,643.00	0.00	S/L	5.0
5137	SKIFF	11/01/02	9,942.00	0.00	0.00	9,942.00	0.00	9,942.00	0.00	S/L	5.0
5139	PIPE BENDER	12/01/02	2,495.00	0.00	0.00	2,495.00	0.00	2,495.00	0.00	S/L	5.0
5140	BLAST POT	11/01/02	11,429.00	0.00	0.00	11,429.00	0.00	11,429.00	0.00	S/L	5.0
5141	BOB CAT	11/01/02	11,595.00	0.00	0.00	11,595.00	0.00	11,595.00	0.00	S/L	5.0
5143	FLUSHING UNIT	12/01/02	12,953.00	0.00	0.00	12,953.00	0.00	12,953.00	0.00	S/L	5.0
5144	I.R. COMPRESSOR	12/01/02	28,557.00	0.00	0.00	28,557.00	0.00	28,557.00	0.00	S/L	5.0
5149	CLARK 30M# F/L	12/15/02	21,525.00	0.00	0.00	21,525.00	0.00	21,525.00	0.00	S/L	5.0
5151	TEMP SERVICES TRAILER	12/31/02	25,940.00	0.00	0.00	25,940.00	0.00	25,940.00	0.00	S/L	5.0
5156	MISC POWER TOOLS	7/01/02	1,899.00	0.00	0.00	1,899.00	0.00	1,899.00	0.00	S/L	3.0
5157	MISC BLAST/PAINT EQUIP	9/01/02	1,977.00	0.00	0.00	1,977.00	0.00	1,977.00	0.00	S/L	3.0

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Group: MACHINERY & EQUIPMENT (continued)											
5165	SAWMASER DY500 BAND SAW	11/01/03	3,355.00	0.00	0.00	3,355.00	0.00	3,355.00	0.00	S/L	5.0
5166	POWER SKIFF	10/01/03	5,638.00	0.00	0.00	5,638.00	0.00	5,638.00	0.00	S/L	5.0
5167	PRESS BRAKE	10/01/03	11,125.00	0.00	0.00	11,125.00	0.00	11,125.00	0.00	S/L	5.0
5169	CLARK 14000#	7/01/03	6,310.00	0.00	0.00	6,310.00	0.00	6,310.00	0.00	S/L	5.0
5172	SCISSOR LIFT	5/01/03	3,895.00	0.00	0.00	3,895.00	0.00	3,895.00	0.00	S/L	5.0
5173	WIRE ROPE LUBE	3/01/03	6,386.53	0.00	0.00	6,386.53	0.00	6,386.53	0.00	S/L	5.0
5175	FAIRHAVEN SIGN	12/01/03	9,184.00	0.00	0.00	9,184.00	0.00	9,184.00	0.00	S/L	5.0
5176	LATHES	5/01/03	16,656.00	0.00	0.00	16,656.00	0.00	16,656.00	0.00	S/L	5.0
5177	WELDING EQUIPMENT	11/01/03	7,319.00	0.00	0.00	7,319.00	0.00	7,319.00	0.00	S/L	5.0
5178	HYDRAULIC FLUSHING UNIT	12/01/03	9,966.00	0.00	0.00	9,966.00	0.00	9,966.00	0.00	S/L	5.0
5179	IRON WORKER	11/01/03	16,500.00	0.00	0.00	16,500.00	0.00	16,500.00	0.00	S/L	5.0
5191	P&H TRUCK CRANE	12/01/04	177,646.00	0.00	0.00	177,646.00	0.00	177,646.00	0.00	S/L	10.0
5192	ASSTD SHIP REPAIR EQUIP	11/01/04	54,657.00	0.00	0.00	54,657.00	0.00	54,657.00	0.00	S/L	3.0
5193	HYD SHEAR	8/01/04	28,100.00	0.00	0.00	28,100.00	0.00	28,100.00	0.00	S/L	3.0
5194	CINCINNATI BRAKE	8/01/04	20,700.00	0.00	0.00	20,700.00	0.00	20,700.00	0.00	S/L	3.0
5195	CLEM BLAST POT	4/01/04	8,107.50	0.00	0.00	8,107.50	0.00	8,107.50	0.00	S/L	3.0
5196	400 AMP DIESEL WELDER	4/01/04	4,896.00	0.00	0.00	4,896.00	0.00	4,896.00	0.00	S/L	3.0
5197	210 CFM COMPRESSOR	4/01/04	4,352.00	0.00	0.00	4,352.00	0.00	4,352.00	0.00	S/L	3.0
5198	KING AIRLESS PAINT POT	7/01/04	4,346.56	0.00	0.00	4,346.56	0.00	4,346.56	0.00	S/L	3.0
5202	1991 SULLAIR COMPRESSOR	10/01/04	12,972.00	0.00	0.00	12,972.00	0.00	12,972.00	0.00	S/L	5.0
5203	10000 CFM DUST COLLECTOR	10/01/04	21,640.00	0.00	0.00	21,640.00	0.00	21,640.00	0.00	S/L	5.0
5205	ATLAS COPCO COMPRESSOR	11/01/04	5,090.00	0.00	0.00	5,090.00	0.00	5,090.00	0.00	S/L	5.0
5206	ASSTD WELDERS & TOOLS	6/01/04	30,860.00	0.00	0.00	30,860.00	0.00	30,860.00	0.00	S/L	5.0
5211	TANKS FOR DRYDOCK	4/01/05	11,463.00	0.00	0.00	11,463.00	0.00	11,463.00	0.00	S/L	5.0
5212	MOBILE OFFICES	5/01/05	18,488.18	0.00	0.00	18,488.18	0.00	18,488.18	0.00	S/L	5.0
5213	KOHLER GENERATOR	6/01/05	33,542.00	0.00	0.00	33,542.00	0.00	33,542.00	0.00	S/L	5.0
5216	DRIEAZ BLOWERS	10/01/05	5,614.20	0.00	0.00	5,614.20	0.00	5,614.20	0.00	S/L	5.0
5223	30' SCISSOR MANLIFT	5/01/06	2,552.00	0.00	0.00	2,552.00	0.00	2,552.00	0.00	S/L	5.0
5227	POWERMAX 1250 25' TORCH	2/01/06	3,042.00	0.00	0.00	3,042.00	0.00	3,042.00	0.00	S/L	5.0
5230	WELDING BANK	11/01/06	4,000.00	0.00	0.00	4,000.00	0.00	4,000.00	0.00	S/L	5.0
5231	WELDING BANK	11/01/06	4,000.00	0.00	0.00	4,000.00	0.00	4,000.00	0.00	S/L	5.0
5232	BORING BAR	12/15/06	25,265.00	0.00	0.00	25,265.00	0.00	25,265.00	0.00	S/L	5.0
5234	POWER PANEL	12/31/06	3,000.00	0.00	0.00	3,000.00	0.00	3,000.00	0.00	S/L	5.0
5235	HYSTER FORKLIFT	12/31/06	8,000.00	0.00	0.00	8,000.00	0.00	8,000.00	0.00	S/L	5.0
5238	WESTINGHOUSE TRANSFORMER	6/01/07	10,750.00	0.00	0.00	10,750.00	0.00	10,750.00	0.00	S/L	5.0
5239	ATLAS AIR COMPRESSOR	6/01/07	9,999.00	0.00	0.00	9,999.00	0.00	9,999.00	0.00	S/L	5.0
5240	HYSTER H155XL	3/01/07	26,000.00	0.00	0.00	26,000.00	0.00	26,000.00	0.00	S/L	5.0
5242	HYSTER 8000# F/L	6/01/07	7,301.50	0.00	0.00	7,301.50	0.00	7,301.50	0.00	S/L	5.0
5243	STEEL DOCK PLATES	7/01/07	113,560.92	0.00	0.00	113,560.92	0.00	113,560.92	0.00	S/L	5.0
5244	DIESEL TRAILER WELDER	9/01/07	5,700.00	0.00	0.00	5,700.00	0.00	5,700.00	0.00	S/L	5.0
5248	STEEL BEAMS	12/01/07	150,000.00	0.00	0.00	136,250.00	13,750.00	150,000.00	0.00	S/L	10.0
5254	2004 TORO DINGO TX420	12/01/07	9,000.00	0.00	0.00	9,000.00	0.00	9,000.00	0.00	S/L	5.0
5255	2004 TORO DINGO TX 420	12/01/07	9,000.00	0.00	0.00	9,000.00	0.00	9,000.00	0.00	S/L	5.0
5262	XMTWELDER	3/01/08	2,478.12	0.00	0.00	2,478.12	0.00	2,478.12	0.00	S/L	5.0
5263	BROOM ATTACHMENT	1/01/08	3,468.80	0.00	0.00	3,468.80	0.00	3,468.80	0.00	S/L	5.0
5264	BROOM ATTACHMENT	1/01/08	3,468.80	0.00	0.00	3,468.80	0.00	3,468.80	0.00	S/L	5.0
5265	HYDRO BLASTER	8/01/08	90,600.00	0.00	0.00	90,600.00	0.00	90,600.00	0.00	S/L	5.0
5270	SANDBLAST CABINET	4/01/09	2,500.00	0.00	0.00	2,500.00	0.00	2,500.00	0.00	S/L	5.0
5271	SEMI-SUBMERSIBLE BARGE	11/01/09	14,192,668.91	0.00	0.00	5,085,706.39	709,633.45	5,795,339.84	8,397,329.07	S/L	20.0

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Group: MACHINERY & EQUIPMENT (continued)											
5273	EMERGENCY GENERATOR	6/01/09	37,000.00	0.00	0.00	37,000.00	0.00	37,000.00	0.00	S/L	5.0
5274	DOCK RAMP	6/01/09	6,189.00	0.00	0.00	6,189.00	0.00	6,189.00	0.00	S/L	5.0
5277	2001 R/R TRAILER	7/01/09	28,565.00	0.00	0.00	28,565.00	0.00	28,565.00	0.00	S/L	5.0
5278	2001 RR TRAILER	7/01/09	19,385.00	0.00	0.00	19,385.00	0.00	19,385.00	0.00	S/L	5.0
5281	MILLER XMT	11/01/09	3,312.59	0.00	0.00	3,312.59	0.00	3,312.59	0.00	S/L	5.0
5282	MILLER XMT	11/01/09	3,312.59	0.00	0.00	3,312.59	0.00	3,312.59	0.00	S/L	5.0
5283	MILLER XMT	11/01/09	3,312.59	0.00	0.00	3,312.59	0.00	3,312.59	0.00	S/L	5.0
5286	4-21,000 GALLON FRAC TANKS	1/26/10	105,120.00	0.00	0.00	72,708.00	10,512.00	83,220.00	21,900.00	S/L	10.0
5291	PAINT PUMP XM PLURAL SPR/A	4/01/10	52,300.25	0.00	0.00	52,300.25	0.00	52,300.25	0.00	S/L	5.0
5292	ELECTROPULSE	8/31/10	71,100.00	0.00	0.00	71,100.00	0.00	71,100.00	0.00	S/L	5.0
5293	ELECTRICAL TRANSFORMER	9/30/10	5,850.00	0.00	0.00	5,850.00	0.00	5,850.00	0.00	S/L	5.0
5294	DUST COLLECTOR 12,000	10/31/10	47,633.34	0.00	0.00	47,633.34	0.00	47,633.34	0.00	S/L	5.0
5295	DUST COLLECTOR 20,000	10/31/10	76,225.66	0.00	0.00	76,225.66	0.00	76,225.66	0.00	S/L	5.0
5298	AIR DRYERS	11/12/10	36,527.51	0.00	0.00	36,527.51	0.00	36,527.51	0.00	S/L	5.0
5299	GENERATOR CUMMINS 725KW	8/31/10	249,998.00	0.00	0.00	249,998.00	0.00	249,998.00	0.00	S/L	5.0
5300	25 GALLON RECYCLER	6/25/10	24,249.00	0.00	0.00	24,249.00	0.00	24,249.00	0.00	S/L	5.0
5302	2010 GROVE RT880E CRANE	1/01/11	33,892.33	0.00	0.00	33,892.33	0.00	33,892.33	0.00	S/L	5.0
5303	QUINCY NW AIR COMPRESSOR	1/20/11	5,635.28	0.00	0.00	5,635.28	0.00	5,635.28	0.00	S/L	5.0
5304	QUINCY NW AIR COMPRESSOR	1/20/11	5,635.28	0.00	0.00	5,635.28	0.00	5,635.28	0.00	S/L	5.0
5305	BLAST PAK	1/01/11	907.34	0.00	0.00	907.34	0.00	907.34	0.00	S/L	5.0
5306	BLAST PAK	1/01/11	907.34	0.00	0.00	907.34	0.00	907.34	0.00	S/L	5.0
5307	SEMI SUBMERSIBLE - TAX	1/01/10	807,500.00	0.00	0.00	282,625.00	40,375.00	323,000.00	484,500.00	S/L	20.0
5308	SECURITY CAMERA SYSTEM	12/31/11	4,455.64	0.00	0.00	4,455.64	0.00	4,455.64	0.00	S/L	3.0
5312	ELECTRICAL CORDS FAITHFUL	1/11/12	5,084.16	0.00	0.00	5,084.16	0.00	5,084.16	0.00	S/L	5.0
5313	225KVA 480V-208V TRANSFOR	6/20/12	18,696.40	0.00	0.00	16,826.76	1,869.64	18,696.40	0.00	S/L	5.0
5314	GE Loan Fee	7/01/12	18,000.00	0.00	0.00	10,125.00	2,250.00	12,375.00	5,625.00	S/L	8.0
5315	Impeller Pumps AFDL45	7/30/13	16,018.00	0.00	0.00	10,945.63	3,203.60	14,149.23	1,868.77	S/L	5.0
5316	FS Ballast Control System	10/15/13	34,802.66	0.00	0.00	22,621.72	6,960.53	29,582.25	5,220.41	S/L	5.0
5317	WeldTec Welder/Generator	1/30/13	7,500.00	0.00	0.00	5,875.00	1,500.00	7,375.00	125.00	S/L	5.0
5318	2 Geo Blasters	5/16/13	62,800.00	0.00	0.00	45,006.67	12,560.00	57,566.67	5,233.33	S/L	5.0
5319	3 Teco Frostfighter Blowers	12/12/13	19,322.24	0.00	0.00	11,915.39	3,864.45	15,779.84	3,542.40	S/L	5.0
5320	6 Portable Welders	12/12/13	21,876.96	0.00	0.00	13,490.79	4,375.39	17,866.18	4,010.78	S/L	5.0
5321	Welding Cables	12/12/13	6,535.91	0.00	0.00	4,030.47	1,307.18	5,337.65	1,198.26	S/L	5.0
5322	2002 Hyster 8k Forklift	12/10/13	11,874.98	0.00	0.00	7,322.92	2,375.00	9,697.92	2,177.06	S/L	5.0
5323	2004 Hyster 8k Forklift	12/10/13	13,452.12	0.00	0.00	8,295.46	2,690.42	10,985.88	2,466.24	S/L	5.0
5331	70x14 Mobile Office Trailer	12/31/14	24,052.90	0.00	0.00	4,810.58	2,405.29	7,215.87	16,837.03	S/L	10.0
5332	70x14 Mobile Office Trailer	12/31/14	25,305.57	0.00	0.00	5,061.12	2,530.56	7,591.68	17,713.89	S/L	10.0
5333	Mobile Quiet Vacuum	12/31/14	141,778.02	0.00	0.00	40,508.00	20,254.00	60,762.00	81,016.02	S/L	7.0
5334	Quincy QNWV200 Air Compressor	12/31/14	135,815.22	0.00	0.00	38,804.34	19,402.17	58,206.51	77,608.71	S/L	7.0
5335	Gate Improvements	12/31/14	22,169.60	0.00	0.00	6,334.18	3,167.09	9,501.27	12,668.33	S/L	7.0
5336	Bore Scope	12/31/14	7,085.00	0.00	0.00	2,834.00	1,417.00	4,251.00	2,834.00	S/L	5.0
5337	Video Scope	12/31/14	9,295.00	0.00	0.00	3,718.00	1,859.00	5,577.00	3,718.00	S/L	5.0
5338	150 Ton Press w/Lock	12/31/14	6,633.06	0.00	0.00	2,653.22	1,326.61	3,979.83	2,653.23	S/L	5.0
5339	Master Puller Set	12/31/14	10,326.50	0.00	0.00	4,130.60	2,065.30	6,195.90	4,130.60	S/L	5.0
5340	Landa Hot Water Pressure Washer	3/24/14	10,079.04	0.00	0.00	5,543.48	2,015.81	7,559.29	2,519.75	S/L	5.0
5341	3 Stage Electric Pump	12/31/14	6,067.53	0.00	0.00	2,427.02	1,213.51	3,640.53	2,427.00	S/L	5.0
5342	1" Square Drive Torque Tool	12/31/14	6,114.38	0.00	0.00	2,445.76	1,222.88	3,668.64	2,445.74	S/L	5.0
5343	1.5" Square Drive Torque Tool	12/31/14	8,147.07	0.00	0.00	3,258.82	1,629.41	4,888.23	3,258.84	S/L	5.0
5344	1.5" Drive Torque Wrench	12/31/14	11,946.13	0.00	0.00	4,778.46	2,389.23	7,167.69	4,778.44	S/L	5.0

Book Asset Detail 1/01/17 - 12/31/17

FYE: 12/31/2017

Asset	*	Property Description	Date In Service	Book Cost	Book Sec 179 Exp c	Book Sal Value	Book Prior Depreciation	Book Current Depreciation	Book End Depr	Book Net Book Value	Book Method	Book Period
Group: MACHINERY & EQUIPMENT (continued)												
5350		Blast Pot	2/17/15	22,000.00	0.00	0.00	8,250.00	4,400.00	12,650.00	9,350.00	S/L	5.0
5351		Yard Lights	2/17/15	5,000.00	0.00	0.00	1,875.00	1,000.00	2,875.00	2,125.00	S/L	5.0
5352		Flexible Duct Hose for Blowers	7/17/15	15,552.36	0.00	0.00	4,276.90	3,110.47	7,387.37	8,164.99	S/L	5.0
5353		Industrial Pump System & Cart	8/21/15	5,271.95	0.00	0.00	1,449.79	1,054.39	2,504.18	2,767.77	S/L	5.0
5354		Mobile Power Control Box	9/23/15	5,350.00	0.00	0.00	1,471.25	1,070.00	2,541.25	2,808.75	S/L	5.0
5356		Zeks Mobile 1000 SCFM Dryer Un	11/19/15	22,812.87	0.00	0.00	5,132.89	4,562.57	9,695.46	13,117.41	S/L	5.0
5357		Mobile Power Supply Rack 1	12/30/15	18,087.68	0.00	0.00	4,069.73	3,617.54	7,687.27	10,400.41	S/L	5.0
5358		Mobile Power Supply Rack 2	12/30/15	18,087.68	0.00	0.00	4,069.73	3,617.54	7,687.27	10,400.41	S/L	5.0
5359		Mobile Power Supply Rack 3	12/30/15	18,087.68	0.00	0.00	4,069.73	3,617.54	7,687.27	10,400.41	S/L	5.0
5363		Sunbelt Transformer	1/06/16	22,558.51	0.00	0.00	4,511.70	4,511.70	9,023.40	13,535.11	S/L	5.0
5364		Praxair Power Supply Rack	1/18/16	18,087.68	0.00	0.00	3,316.07	3,617.54	6,933.61	11,154.07	S/L	5.0
5365		Arizona Vortex Multi Pod	4/14/16	5,206.73	0.00	0.00	781.01	1,041.35	1,822.36	3,384.37	S/L	5.0
5366		2016 Hyster H155 Forklift	9/14/16	69,023.85	0.00	0.00	4,601.59	13,804.77	18,406.36	50,617.49	S/L	5.0
5367		Bard Heat Pump	9/19/16	7,518.78	0.00	0.00	375.94	1,503.76	1,879.70	5,639.08	S/L	5.0
5368		2016 Hyster H80FT Forklift	10/05/16	42,979.00	0.00	0.00	2,148.95	8,595.80	10,744.75	32,234.25	S/L	5.0
5369		2016 Hyster H80 Forklift	10/05/16	42,979.00	0.00	0.00	2,148.95	8,595.80	10,744.75	32,234.25	S/L	5.0
5370		2016 Hyster H190 Forklift	10/10/16	105,603.88	0.00	0.00	5,280.19	21,120.78	26,400.97	79,202.91	S/L	5.0
5371		Lumber Cover Structure	12/31/16	11,497.50	0.00	0.00	0.00	2,299.50	2,299.50	9,198.00	S/L	5.0
5372		Impeller & Casing for AFDL45	3/22/16	34,660.00	0.00	0.00	5,199.00	6,932.00	12,131.00	22,529.00	S/L	5.0
5373		Crane Parts for RT80E	7/08/16	27,987.75	0.00	0.00	2,798.78	5,597.55	8,396.33	19,591.42	S/L	5.0
5374		Barge Crane Upgrades	9/08/16	273,631.17	0.00	0.00	18,242.08	54,726.23	72,968.31	200,662.86	S/L	5.0
5375		Faithful Servant Upgrades	12/31/16	339,960.00	0.00	0.00	0.00	67,992.00	67,992.00	271,968.00	S/L	5.0
5376		Life Boat Upgrades	12/31/16	10,839.77	0.00	0.00	0.00	2,167.95	2,167.95	8,671.82	S/L	5.0
5381		EZ Go XL-875 Flatbed Cart Charger	1/26/17	2,064.08	0.00c	0.00	0.00	378.41	378.41	1,685.67	S/L	5.0
5382		Security Cameras	4/27/17	26,586.61	0.00c	0.00	0.00	3,544.88	3,544.88	23,041.73	S/L	5.0
5383		Security Monitoring Station	4/10/17	1,871.97	0.00c	0.00	0.00	280.80	280.80	1,591.17	S/L	5.0
5384		Scaffolding	9/18/17	13,146.18	0.00c	0.00	0.00	657.31	657.31	12,488.87	S/L	5.0
5385		Scaffolding	10/06/17	18,446.32	0.00c	0.00	0.00	922.32	922.32	17,524.00	S/L	5.0
MACHINERY & EQUIPMENT				20,011,747.59	0.00c	1,877.01	8,839,419.65	1,114,465.02	9,953,884.67	10,057,862.92		
*Less: Dispositions				20,158.00	0.00	0.00	20,158.00	0.00	20,158.00	0.00		
Net MACHINERY & EQUIPMENT				19,991,589.59	0.00c	1,877.01	8,819,261.65	1,114,465.02	9,933,726.67	10,057,862.92		
Group: OFFICE FURNITURE & FIXT												
3000		SOFTWARE	2/28/92	533.61	0.00	53.36	480.25	0.00	480.25	53.36	S/L	5.0
3001		WORK FOR WINDOWS	12/16/94	132.23	0.00	13.22	132.23	0.00	132.23	0.00	S/L	5.0
3002		4 MG MEMORY FOR ZENON	12/29/94	194.22	0.00	19.42	194.22	0.00	194.22	0.00	S/L	5.0
3003		DK280 TELEPHONE SYSTEM	8/20/96	8,671.62	0.00	0.00	8,671.62	0.00	8,671.62	0.00	S/L	5.0
3004		80486 133-DX COMPUTER	8/20/96	1,179.20	0.00	0.00	1,179.20	0.00	1,179.20	0.00	S/L	5.0
3005		FAX	8/26/91	970.57	0.00	97.05	970.57	0.00	970.57	0.00	S/L	5.0
3006		COMPUTER & PRINTER	9/27/91	1,350.00	0.00	135.00	1,350.00	0.00	1,350.00	0.00	S/L	5.0
3007		DRAFTING TABLES	11/05/91	394.93	0.00	39.49	394.93	0.00	394.93	0.00	S/L	5.0
3008		(16) FLAT FILES	12/12/91	643.79	0.00	64.38	643.79	0.00	643.79	0.00	S/L	5.0
3009		TABLE & CHAIRS	12/17/91	205.58	0.00	20.56	205.58	0.00	205.58	0.00	S/L	5.0
3010		LIGHTS	12/17/91	418.73	0.00	41.87	418.73	0.00	418.73	0.00	S/L	5.0
3011		OTHER OFFICE EQUIPMENT	1/01/92	3,977.28	0.00	397.72	3,977.28	0.00	3,977.28	0.00	S/L	5.0
3012		APPLE POWERBOOK	1/01/92	3,758.00	0.00	375.80	3,758.00	0.00	3,758.00	0.00	S/L	5.0
3013		COMPUTER SWITCH	3/18/92	129.25	0.00	12.92	129.25	0.00	129.25	0.00	S/L	5.0

Book Asset Detail 1/01/17 - 12/31/17

FYE: 12/31/2017

Asset	Property Description	Date In Service	Book Cost	Book Sec 179 Exp c	Book Sal Value	Book Prior Depreciation	Book Current Depreciation	Book End Depr	Book Net Book Value	Book Method	Book Period
Group: OFFICE FURNITURE & FIXT (continued)											
3014	MODEM & RAM	3/31/92	448.99	0.00	44.90	448.99	0.00	448.99	0.00	S/L	5.0
3015	SOLOMON EQUITY III PACK	11/23/92	2,915.99	0.00	291.60	2,624.39	0.00	2,624.39	291.60	S/L	5.0
3016	APPLE PRINTER	6/07/93	946.75	0.00	94.68	946.75	0.00	946.75	0.00	S/L	5.0
3017	EPSON PRINTER	11/09/93	408.56	0.00	40.86	408.56	0.00	408.56	0.00	S/L	5.0
3018	ROOM DIVIDERS	9/15/94	195.84	0.00	19.58	195.84	0.00	195.84	0.00	S/L	5.0
3019	MITA COPIER	6/14/94	927.90	0.00	92.79	927.90	0.00	927.90	0.00	S/L	5.0
3020	COMPUTER	4/01/94	900.00	0.00	90.00	900.00	0.00	900.00	0.00	S/L	5.0
3021	DIVIDERS AND STANDS	11/15/94	803.39	0.00	80.39	803.39	0.00	803.39	0.00	S/L	5.0
3022	MODEM	12/16/94	133.80	0.00	13.38	133.80	0.00	133.80	0.00	S/L	5.0
3023	420 K HARD DRIVE	12/16/94	295.65	0.00	29.57	295.65	0.00	295.65	0.00	S/L	5.0
3024	COPIERS, PRINTERS, ETC.	12/17/94	574.76	0.00	57.48	574.76	0.00	574.76	0.00	S/L	5.0
3025	HP LASER JET 4LP	12/22/94	1,500.66	0.00	150.07	1,500.66	0.00	1,500.66	0.00	S/L	5.0
3026	COMPUTER, MONITOR, KEYBC	6/16/95	1,063.00	0.00	0.00	1,063.00	0.00	1,063.00	0.00	S/L	5.0
3027	486DX66 COMPUTER	7/31/95	1,510.60	0.00	0.00	1,510.60	0.00	1,510.60	0.00	S/L	5.0
3028	CANON AP 200X TYPEWRITER	12/15/95	134.87	0.00	0.00	134.87	0.00	134.87	0.00	S/L	7.0
3029	IBM COMP 100 DX AT	10/03/95	1,742.00	0.00	0.00	1,742.00	0.00	1,742.00	0.00	S/L	5.0
3030	TOSHIBA 2510 COPIER	9/15/96	5,500.00	0.00	0.00	5,500.00	0.00	5,500.00	0.00	S/L	5.0
3031	80846 133-DX COMPUTER	8/20/96	1,179.20	0.00	0.00	1,179.20	0.00	1,179.20	0.00	S/L	5.0
3032	HP II LASER PRINTER	8/20/96	513.00	0.00	0.00	513.00	0.00	513.00	0.00	S/L	5.0
3033	HP 4+ LASER PRINTER	8/20/96	1,227.20	0.00	0.00	1,227.20	0.00	1,227.20	0.00	S/L	5.0
3034	SOLOMON DIRECT DEPOSIT SC	8/20/96	858.60	0.00	0.00	858.60	0.00	858.60	0.00	S/L	3.0
3035	MICROSOFT OFFICE SOFTWARE	8/20/96	754.92	0.00	0.00	754.92	0.00	754.92	0.00	S/L	3.0
3036	3 sets Office Furn. w/conference tab	10/01/96	1,800.00	0.00	0.00	1,800.00	0.00	1,800.00	0.00	S/L	5.0
3037	NEXTEL CELLULAR PHONES	4/01/97	2,994.00	2,294.00	0.00	2,994.00	0.00	2,994.00	0.00	S/L	5.0
3038	COMPUTER UPGRADE	9/01/97	1,051.00	1,051.00	0.00	1,051.00	0.00	1,051.00	0.00	S/L	5.0
3039	LAP TOP COMPUTER- NEIL	12/01/97	1,800.00	1,800.00	0.00	1,800.00	0.00	1,800.00	0.00	S/L	5.0
3040	Computer System	3/01/98	21,523.00	0.00	0.00	21,523.00	0.00	21,523.00	0.00	S/L	5.0
3041	PC and Printer	3/01/98	2,256.00	0.00	0.00	2,256.00	0.00	2,256.00	0.00	S/L	5.0
3042	Aptiva Computer	7/01/98	1,195.00	0.00	0.00	1,195.00	0.00	1,195.00	0.00	S/L	5.0
3043	Computer	7/01/98	1,206.00	0.00	0.00	1,206.00	0.00	1,206.00	0.00	S/L	5.0
3044	Color Printer	9/01/98	977.00	0.00	0.00	977.00	0.00	977.00	0.00	S/L	5.0
3045	Office Furniture	9/01/98	566.00	0.00	0.00	566.00	0.00	566.00	0.00	S/L	5.0
3046	Minolta Copier	7/01/98	650.00	0.00	0.00	650.00	0.00	650.00	0.00	S/L	5.0
3047	High Speed Minolta	8/01/98	467.00	0.00	0.00	467.00	0.00	467.00	0.00	S/L	5.0
3048	Konika Copier	6/01/98	400.00	0.00	0.00	400.00	0.00	400.00	0.00	S/L	5.0
5033	MICRON-TECH COMPUTER	2/01/99	1,441.00	0.00	0.00	1,441.00	0.00	1,441.00	0.00	S/L	5.0
5034	E-MACHINE COMPUTER	2/01/99	1,094.64	0.00	0.00	1,094.64	0.00	1,094.64	0.00	S/L	5.0
5035	AUTO-CAD PROGRAM	2/01/99	428.00	0.00	0.00	428.00	0.00	428.00	0.00	S/L	5.0
5036	E-MACHINE - UPSTAIRS	5/01/99	818.00	0.00	0.00	818.00	0.00	818.00	0.00	S/L	5.0
5037	PROJECT SOFTWARE	5/01/99	478.00	0.00	0.00	478.00	0.00	478.00	0.00	S/L	5.0
5038	COMPUWEST COMPUTER	2/01/99	1,231.00	0.00	0.00	1,231.00	0.00	1,231.00	0.00	S/L	5.0
5039	DEPRECIATION SOFTWARE	2/01/99	1,626.00	0.00	0.00	1,626.00	0.00	1,626.00	0.00	S/L	5.0
5040	COMPAQ LAPTOP	11/01/99	1,409.00	0.00	0.00	1,409.00	0.00	1,409.00	0.00	S/L	5.0
5083	OFFICE FURNITURE	10/01/00	3,439.00	0.00	0.00	3,439.00	0.00	3,439.00	0.00	S/L	5.0
5084	G-4 MACINTOSH	11/01/00	1,065.00	0.00	0.00	1,065.00	0.00	1,065.00	0.00	S/L	3.0
5085	HP LASER 5000	10/01/00	1,073.00	0.00	0.00	1,073.00	0.00	1,073.00	0.00	S/L	3.0
5087	HP LASER 2100	10/01/00	678.00	0.00	0.00	678.00	0.00	678.00	0.00	S/L	3.0
5089	HP LASER 4050	7/01/00	1,120.00	0.00	0.00	1,120.00	0.00	1,120.00	0.00	S/L	3.0
5097	FUJITSU PLASMA MONITOR	10/01/00	3,082.00	0.00	0.00	3,082.00	0.00	3,082.00	0.00	S/L	3.0

Book Asset Detail 1/01/17 - 12/31/17

FYE: 12/31/2017

Asset	*	Property Description	Date In Service	Book Cost	Book Sec 179 Exp c	Book Sal Value	Book Prior Depreciation	Book Current Depreciation	Book End Depr	Book Net Book Value	Book Method	Book Period
Group: OFFICE FURNITURE & FIXT (continued)												
5118		MAC G4	6/01/01	2,370.00	0.00	0.00	2,370.00	0.00	2,370.00	0.00	S/L	3.0
5119		DELL PROCESSORS	9/01/01	2,058.00	0.00	0.00	2,058.00	0.00	2,058.00	0.00	S/L	3.0
5120		PRIMAVERA SOFTWARE	12/01/01	1,091.00	0.00	0.00	1,091.00	0.00	1,091.00	0.00	S/L	3.0
5153		TELERAID PHONE SYSTEM	7/01/02	4,687.11	0.00	0.00	4,687.11	0.00	4,687.11	0.00	S/L	5.0
5187		SONY LAP TOP	2/01/03	2,779.89	0.00	0.00	2,779.89	0.00	2,779.89	0.00	S/L	3.0
5188		ADDITIONAL USERS D&C	10/01/03	6,756.56	0.00	0.00	6,756.56	0.00	6,756.56	0.00	S/L	5.0
5253		RICOH AF1045 COPIER	4/30/07	3,536.00	0.00	0.00	3,536.00	0.00	3,536.00	0.00	S/L	3.0
5257		RICOH COLOR COPIER	4/07/08	3,916.80	0.00	0.00	3,916.80	0.00	3,916.80	0.00	S/L	5.0
5280		ESTIMATING SOFTWARE	4/01/09	22,211.02	0.00	0.00	22,211.02	0.00	22,211.02	0.00	S/L	3.0
5296		COMPUTERS	10/31/10	8,424.10	0.00	0.00	8,424.10	0.00	8,424.10	0.00	S/L	3.0
5310		COMPUTERS	7/31/11	6,108.74	0.00	0.00	6,108.74	0.00	6,108.74	0.00	S/L	3.0
5311		RICOH SPC811	3/30/11	4,695.60	0.00	0.00	4,695.60	0.00	4,695.60	0.00	S/L	5.0
5324		Dell Blade Server	4/19/13	4,732.72	0.00	0.00	3,470.65	946.54	4,417.19	315.53	S/L	5.0
5325		ComputerEase Software	6/27/13	26,991.00	0.00	0.00	18,893.70	5,398.20	24,291.90	2,699.10	S/L	5.0
5326		Dockmaster Software	12/12/13	7,000.00	0.00	0.00	4,316.67	1,400.00	5,716.67	1,283.33	S/L	5.0
5327		Weld Office Cert Software	12/10/13	5,200.00	0.00	0.00	3,206.67	1,040.00	4,246.67	953.33	S/L	5.0
5345		Savin C4503 System Printer	12/31/14	11,087.40	0.00	0.00	4,434.96	2,217.48	6,652.44	4,434.96	S/L	5.0
5346		Savin C4503 System Printer	12/31/14	11,087.40	0.00	0.00	4,434.96	2,217.48	6,652.44	4,434.96	S/L	5.0
5360		Telrad IP Phone System	7/21/15	50,030.00	0.00	0.00	13,758.25	10,006.00	23,764.25	26,265.75	S/L	5.0
5377		Dynamics SL Software	12/31/16	113,719.90	0.00	0.00	0.00	22,743.98	22,743.98	90,975.92	S/L	5.0
5378		Telrad IP Phones - Tacoma	12/31/16	6,994.50	0.00	0.00	0.00	1,398.90	1,398.90	5,595.60	S/L	5.0
OFFICE FURNITURE & FIXT				408,440.07	0.00c	2,276.09	223,768.05	47,368.58	271,136.63	137,303.44		
Group: TRANSPORTATION EQUIPMENT												
5004	*	DODGE RAM PICK-UP TRUCK	6/18/93	3,189.60	0.00	318.96	3,189.60	0.00	3,189.60	0.00	S/L	5.0
5009		FLAT BED TRUCK - OVERHAU	10/17/94	1,428.50	0.00	142.85	1,428.50	0.00	1,428.50	0.00	S/L	5.0
5016		HYSTER 4450LB HRT FORKLIFT	6/15/96	3,261.46	0.00	0.00	3,261.46	0.00	3,261.46	0.00	S/L	5.0
5022		F-150 TRUCK	9/15/96	3,900.00	0.00	0.00	3,900.00	0.00	3,900.00	0.00	S/L	5.0
5024	*	2 USED TRUCKS	9/01/97	6,950.00	904.00	0.00	6,950.00	0.00	6,950.00	0.00	S/L	5.0
5026		30' Shop Trailer/ Tool Boxes	11/01/98	2,700.00	0.00	0.00	2,700.00	0.00	2,700.00	0.00	S/L	5.0
5059		1988 DODGE D350	4/01/99	4,211.00	0.00	0.00	4,211.00	0.00	4,211.00	0.00	S/L	5.0
5063		1990 DODGE DAKOTA P/U	9/01/99	4,057.00	0.00	0.00	4,057.00	0.00	4,057.00	0.00	S/L	5.0
5075		1192 FORD FLAT BED	1/21/00	11,924.00	0.00	0.00	11,924.00	0.00	11,924.00	0.00	S/L	5.0
5086		92 CHEV STEP VAN RED	7/01/00	11,382.00	0.00	0.00	11,382.00	0.00	11,382.00	0.00	S/L	5.0
5094		89 RANGER 4X4	12/01/00	3,469.00	0.00	0.00	3,469.00	0.00	3,469.00	0.00	S/L	3.0
5096		97 CHEV 1 TON	12/01/00	10,434.00	0.00	0.00	10,434.00	0.00	10,434.00	0.00	S/L	5.0
5105		1997 RANGER WHITE	9/26/01	4,584.00	0.00	0.00	4,584.00	0.00	4,584.00	0.00	S/L	5.0
5108		BATHROOM TRAILER	8/01/01	29,983.00	0.00	0.00	29,983.00	0.00	29,983.00	0.00	S/L	5.0
5142		FLAT BED TRAILERS	11/01/02	1,133.00	0.00	0.00	1,133.00	0.00	1,133.00	0.00	S/L	5.0
5148		WHITE SVCE BODY	3/20/02	8,843.00	0.00	0.00	8,843.00	0.00	8,843.00	0.00	S/L	5.0
5152		TRACTOR TRAILER	12/31/02	16,280.55	0.00	0.00	16,280.55	0.00	16,280.55	0.00	S/L	5.0
5180		1987 P30 STEP VAN	9/01/03	4,800.00	0.00	0.00	4,800.00	0.00	4,800.00	0.00	S/L	5.0
5182		1988 P30 STEP VAN	9/01/03	3,900.00	0.00	0.00	3,900.00	0.00	3,900.00	0.00	S/L	5.0
5210		1997 DODGE PASS VAN	12/31/04	5,800.00	0.00	0.00	5,800.00	0.00	5,800.00	0.00	S/L	5.0
5217		1995 XJR BLUE	4/01/05	16,646.00	0.00	0.00	16,646.00	0.00	16,646.00	0.00	S/L	5.0
5219		1997 DODGE PASS VAN	3/01/05	5,440.00	0.00	0.00	5,440.00	0.00	5,440.00	0.00	S/L	5.0
5221		BLUE XKE MONTEREY	9/01/05	14,000.00	0.00	0.00	14,000.00	0.00	14,000.00	0.00	S/L	5.0

Book Asset Detail 1/01/17 - 12/31/17

FYE: 12/31/2017

Asset	* Property Description	Date In Service	Book Cost	Book Sec 179 Exp c	Book Sal Value	Book Prior Depreciation	Book Current Depreciation	Book End Depr	Book Net Book Value	Book Method	Book Period
Group: TRANSPORTATION EQUIPMENT (continued)											
5228	1997 FORD F450	6/01/06	11,226.74	0.00	0.00	11,226.74	0.00	11,226.74	0.00	S/L	5.0
5229	2005 DODGE DAKOTA	9/01/06	10,910.00	0.00	0.00	10,910.00	0.00	10,910.00	0.00	S/L	5.0
5233	1995 CHEV FLATBED	12/31/06	4,500.00	0.00	0.00	4,500.00	0.00	4,500.00	0.00	S/L	5.0
5237	1995 FORD BOX TRUCK	9/01/07	5,385.00	0.00	0.00	5,385.00	0.00	5,385.00	0.00	S/L	5.0
5241	1998 GMC C7500 BOOM	9/01/07	50,000.00	0.00	0.00	50,000.00	0.00	50,000.00	0.00	S/L	5.0
5245	2001 GMC SONOMA	9/01/07	5,080.00	0.00	0.00	5,080.00	0.00	5,080.00	0.00	S/L	5.0
5246	1996 FORD RANGER	9/01/07	3,095.00	0.00	0.00	3,095.00	0.00	3,095.00	0.00	S/L	5.0
5250	1995 FORD F350 XL PU	10/01/07	6,748.00	0.00	0.00	6,748.00	0.00	6,748.00	0.00	S/L	5.0
5259	1999 FORD F/B 12'	2/15/08	10,457.24	0.00	0.00	10,457.24	0.00	10,457.24	0.00	S/L	5.0
5260	2003 FORD RANGER EX C	2/15/08	4,085.00	0.00	0.00	4,085.00	0.00	4,085.00	0.00	S/L	5.0
5261	1994 CHEV 2500	2/15/08	4,585.00	0.00	0.00	4,585.00	0.00	4,585.00	0.00	S/L	5.0
5266	1985 FRUE TRAILER	8/01/08	3,860.00	0.00	0.00	3,860.00	0.00	3,860.00	0.00	S/L	5.0
5267	2007 TRAILBLAZER	11/01/08	11,346.40	0.00	0.00	11,346.40	0.00	11,346.40	0.00	S/L	5.0
5268	SKIFF & TRAILER	11/01/08	4,391.00	0.00	0.00	4,391.00	0.00	4,391.00	0.00	S/L	5.0
5269	99 DODGE RAM PASS VAN	10/01/08	3,812.71	0.00	0.00	3,812.71	0.00	3,812.71	0.00	S/L	5.0
5275	2001 DODGE MAXI WAGON	4/01/09	6,777.00	0.00	0.00	6,777.00	0.00	6,777.00	0.00	S/L	5.0
5284	2000 Chevy Pickup	1/08/10	7,000.00	0.00	0.00	7,000.00	0.00	7,000.00	0.00	S/L	5.0
5285	1986 CHEVY STEPVAN	2/03/10	5,200.00	0.00	0.00	5,200.00	0.00	5,200.00	0.00	S/L	5.0
5287	1990 Chev C3500 MSB P/U	1/04/10	1,756.00	0.00	0.00	1,756.00	0.00	1,756.00	0.00	S/L	5.0
5288	2002 GMC SONOMA EXT CAB 4	1/04/10	4,657.66	0.00	0.00	4,657.66	0.00	4,657.66	0.00	S/L	5.0
5290	TOYOTA TUNDRA	6/16/10	6,100.00	0.00	0.00	6,100.00	0.00	6,100.00	0.00	S/L	5.0
5309	LARSON CJDR	4/21/11	13,817.00	0.00	0.00	13,817.00	0.00	13,817.00	0.00	S/L	5.0
5328	Pete's 2007 Chevy Avalanche	1/08/13	25,352.14	0.00	0.00	20,281.72	5,070.42	25,352.14	0.00	S/L	5.0
5329	2003 Dodge Dakota	1/22/13	11,000.00	0.00	0.00	8,616.67	2,200.00	10,816.67	183.33	S/L	5.0
5330	2001 Dodge Durango	2/11/13	8,350.00	0.00	0.00	6,540.83	1,670.00	8,210.83	139.17	S/L	5.0
5347	2003 Ford F250	4/02/14	9,783.18	0.00	0.00	5,380.76	1,956.64	7,337.40	2,445.78	S/L	5.0
5348	2004 Chev 3500 Express Van	4/02/14	10,266.30	0.00	0.00	5,646.46	2,053.26	7,699.72	2,566.58	S/L	5.0
5349	2000 Ford F250	4/08/14	5,719.80	0.00	0.00	3,145.89	1,143.96	4,289.85	1,429.95	S/L	5.0
5361	2006 Ford F250 #8084	2/11/15	8,866.36	0.00	0.00	3,324.88	1,773.27	5,098.15	3,768.21	S/L	5.0
5362	2006 Ford F250 Supercab #6514	11/03/15	6,995.99	0.00	0.00	1,574.10	1,399.20	2,973.30	4,022.69	S/L	5.0
5379	Boston Whaler skiff	8/01/16	18,231.13	0.00	0.00	1,519.26	3,646.23	5,165.49	13,065.64	S/L	5.0
5380	32 foot Tugboat	10/01/16	60,526.75	0.00	0.00	3,026.34	12,105.35	15,131.69	45,395.06	S/L	5.0
5386	2011 Ford E250 Cargo Van	4/13/17	30,985.83	0.00c	0.00	0.00	4,647.87	4,647.87	26,337.96	S/L	5.0
TRANSPORTATION EQUIPMENT			559,183.34	0.00c	461.81	422,162.77	37,666.20	459,828.97	99,354.37		
*Less: Dispositions			13,234.60	0.00	318.96	13,234.60	0.00	13,234.60	0.00		
Net TRANSPORTATION EQUIPMENT			545,948.74	0.00c	142.85	408,928.17	37,666.20	446,594.37	99,354.37		
Grand Total			21,601,504.90	0.00c	4,614.91	9,740,657.86	1,213,478.75	10,954,136.61	10,647,368.29		
Less: Dispositions			33,392.60	0.00	318.96	33,392.60	0.00	33,392.60	0.00		
Net Grand Total			21,568,112.30	0.00c	4,295.95	9,707,265.26	1,213,478.75	10,920,744.01	10,647,368.29		

Book Summary Report 1/01/17 - 12/31/17

FYE: 12/31/2017

Location	Cost Beginning	Cost Acquisitions	Cost Disposals	Cost Ending	Depreciation Prior	Depreciation Additions	Depreciation Reductions	Depreciation Ending
Bellingham	20,253,350.70	33,656.58	3,095.00	20,283,912.28	8,508,816.89	1,197,914.65	3,095.00	9,703,636.54
Tacoma	1,255,053.21	59,444.41	30,297.60	1,284,200.02	1,231,840.97	15,564.10	30,297.60	1,217,107.47
Grand Total	<u>21,508,403.91</u>	<u>93,100.99</u>	<u>33,392.60</u>	<u>21,568,112.30</u>	<u>9,740,657.86</u>	<u>1,213,478.75</u>	<u>33,392.60</u>	<u>10,920,744.01</u>

Fill in this information to identify the case:

Debtor name **Puglia Engineering Inc.**

United States Bankruptcy Court for the: **WESTERN DISTRICT OF WASHINGTON**

Case number (if known) **18-41324**

☒ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	1st National Lending Creditor's Name 1029 Hwy 6 N. #650-283 Houston, TX 77079 Creditor's mailing address Creditor's email address, if known Date debt was incurred Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien Specific equipment, Several new purchases, Capital lease. Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$118,737.00	Unknown

2.2	Grow America Fund - Equipment Creditor's Name 708 Third Ave. #710 New York, NY 10017 Creditor's mailing address Creditor's email address, if known Date debt was incurred Last 4 digits of account number Do multiple creditors have an interest in the same property?	Describe debtor's property that is subject to a lien Equipment; Blanket lien on equipment. Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply	\$295,660.00	\$0.00
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Debtor **Puglia Engineering Inc.**
Name

Case number (if know) **18-41324**

☒ No
☐ Yes. Specify each creditor,
including this creditor and its relative
priority.

☐ Contingent
☐ Unliquidated
☐ Disputed

2.3 Washington Federal

Creditor's Name

**400 - 108th Ave. NE #104
Bellevue, WA 98004**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**Do multiple creditors have an
interest in the same property?**

☒ No
☐ Yes. Specify each creditor,
including this creditor and its relative
priority.

Describe debtor's property that is subject to a lien

**Large Dry Dock (Faithful Servant); Blanket
lien on all assets.**

\$6,658,972.00

Unknown

Describe the lien

Is the creditor an insider or related party?

☒ No
☐ Yes

Is anyone else liable on this claim?

☐ No
☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent
☐ Unliquidated
☐ Disputed

2.4 Washington Federal

Creditor's Name

**400 - 108th Ave. NE #104
Bellevue, WA 98004**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

**Do multiple creditors have an
interest in the same property?**

☒ No
☐ Yes. Specify each creditor,
including this creditor and its relative
priority.

Describe debtor's property that is subject to a lien

Blanket Lien on Personal Property

\$391,980.00

Unknown

Describe the lien

Is the creditor an insider or related party?

☒ No
☐ Yes

Is anyone else liable on this claim?

☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent
☐ Unliquidated
☐ Disputed

2.5 Washington Federal

Creditor's Name

**400 - 108th Ave. NE #104
Bellevue, WA 98004**

Creditor's mailing address

Creditor's email address, if known

Describe debtor's property that is subject to a lien

A/R & Inventory and Equipment

\$1,950,000.00

Unknown

Describe the lien

Is the creditor an insider or related party?

☒ No
☐ Yes

Is anyone else liable on this claim?

Debtor **Puglia Engineering Inc.**
Name

Case number (if know) **18-41324**

Date debt was incurred

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

2.6 Zurich Payment Bond

Creditor's Name

**c/o Chad Epple @ HUB
PO Box 3018
Bothell, WA 98011**

Creditor's mailing address

Describe debtor's property that is subject to a lien

\$0.00

\$0.00

Describe the lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$9,415,349.00

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

Fill in this information to identify the case:Debtor name **Puglia Engineering Inc.**United States Bankruptcy Court for the: **WESTERN DISTRICT OF WASHINGTON**Case number (if known) **18-41324**☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims****12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** unsecured claims and Part 2 for creditors with **NONPRIORITY** unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).☒ No. Go to Part 2.☐ Yes. Go to line 2.**Part 2: List All Creditors with NONPRIORITY Unsecured Claims****3. List in alphabetical order all of the creditors with nonpriority unsecured claims.** If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address AABERG'S 1424 PUYALLUP AVE TACOMA, WA 98421 Date(s) debt was incurred 10/2/2017 Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$421.02
3.2	Nonpriority creditor's name and mailing address ABATIX PO BOX 671202 DALLAS, TX 75267 Date(s) debt was incurred 12/19/2016 Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$43.07
3.3	Nonpriority creditor's name and mailing address ABATIX PO BOX 671202 DALLAS, TX 75267 Date(s) debt was incurred 12/16/2016 Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$72.91
3.4	Nonpriority creditor's name and mailing address ABATIX PO BOX 671202 DALLAS, TX 75267 Date(s) debt was incurred 12/21/2016 Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$521.68

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3.5	Nonpriority creditor's name and mailing address ABATIX PO BOX 671202 DALLAS, TX 75267 Date(s) debt was incurred <u>12/19/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$43.07
3.6	Nonpriority creditor's name and mailing address ABATIX CORP PO BOX 671202 DALLAS, TX 75267-1202 Date(s) debt was incurred <u>4/20/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,895.36
3.7	Nonpriority creditor's name and mailing address ABS AMERICAS 5950 6TH AVE S SUITE 204 SEATTLE, WA 98108 Date(s) debt was incurred <u>5/28/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,795.00
3.8	Nonpriority creditor's name and mailing address ACCURATE LOCK & SECURITY, INC 200 PROSPECT STREET BELLINGHAM, WA 98225 Date(s) debt was incurred <u>8/16/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$138.27
3.9	Nonpriority creditor's name and mailing address ACTION CLEANING CORP 1668 NEWTON AVE SAN DIEGO, CA 92113 Date(s) debt was incurred <u>2/17/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$85,776.00
3.10	Nonpriority creditor's name and mailing address ACTION CLEANING SERVICES 2009 IRON STREET BELLINGHAM, WA 98225-4211 Date(s) debt was incurred <u>8/31/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,317.63
3.11	Nonpriority creditor's name and mailing address AD. CHEMICAL TRANSPORT INC. 1210 ELKO DRIVE Sunnyvale, CA 94089 Date(s) debt was incurred <u>10/31/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,385.00

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3.12	Nonpriority creditor's name and mailing address ADVANCED CHEMICAL TRANSPORT 1210 ELKO DRIVE Sunnyvale, CA 94089 Date(s) debt was incurred <u>10/31/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,385.00
3.13	Nonpriority creditor's name and mailing address ADVANCED CHEMICAL TRANSPORT . 1210 ELKO DRIVE Sunnyvale, CA 94089 Date(s) debt was incurred <u>10/31/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,470.00
3.14	Nonpriority creditor's name and mailing address ADVANTEC MANUFACTURING USA 28336 HUNTER CREEK ROAD GOLD BEACH, OR 97444 Date(s) debt was incurred <u>7/20/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$132.73
3.15	Nonpriority creditor's name and mailing address AGGREKO LLC PO BOX 972562 DALLAS, TX 75397-2562 Date(s) debt was incurred <u>6/29/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,660.22
3.16	Nonpriority creditor's name and mailing address AGGREKO, LLC PO BOX 972562 Dallas, TX 75397 Date(s) debt was incurred <u>6/12/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$976.50
3.17	Nonpriority creditor's name and mailing address AIRGAS USA, LLC PO BOX 7423 PASADENA, CA 91109-7423 Date(s) debt was incurred <u>2/27/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,269.01
3.18	Nonpriority creditor's name and mailing address ALAMEDA COMMERCIAL PROPERTIES 2900 MAIN ST ALAMEDA, CA 94501 Date(s) debt was incurred <u>4/4/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$910.00

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3.19	Nonpriority creditor's name and mailing address ALAMEDA ELECTRICAL DISTRIBUTOR 2420 BLANDING AVE ALAMEDA, CA 94501 Date(s) debt was incurred <u>7/1/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,497.13
3.20	Nonpriority creditor's name and mailing address ALARMGUARD SECURITY SYSTEMS ALARM CENTER, INC PO BOX 3407 LACEY, WA 98509-3407 Date(s) debt was incurred <u>6/21/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$378.29
3.21	Nonpriority creditor's name and mailing address ALASKAN COPPER & BRASS CO PO BOX 749791 LOS ANGELES, CA 90074-9791 Date(s) debt was incurred <u>8/31/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,172.59
3.22	Nonpriority creditor's name and mailing address ALBANY STEEL, INC 536 CLEVELAND AVE ALBANY, CA 94710-1007 Date(s) debt was incurred <u>4/21/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,933.38
3.23	Nonpriority creditor's name and mailing address ALL AMERICAN ENGRAVING 804B OLD SAMISH RD. BELLINGHAM, WA 98229 Date(s) debt was incurred <u>6/2/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,649.79
3.24	Nonpriority creditor's name and mailing address ALL BAY MILL & LUMBER CO 405 GREEN ISLAND RD AMERICAN CANYON, CA 94503-9649 Date(s) debt was incurred <u>12/14/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,210.87
3.25	Nonpriority creditor's name and mailing address ALLIANCE PO BOX 23804 OAKLAND, CA 94623 Date(s) debt was incurred <u>6/30/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$415.80

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3.26	Nonpriority creditor's name and mailing address ALLIANCE PO BOX 23804 OAKLAND, CA 94623 Date(s) debt was incurred <u>6/30/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,679.40
3.27	Nonpriority creditor's name and mailing address ALLIANCE PO BOX 23804 OAKLAND, CA 94623 Date(s) debt was incurred <u>3/29/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,636.83
3.28	Nonpriority creditor's name and mailing address ALLIANCE GAS PRODUCTS DBA ALLIANCE WELDING SUPPLIES PO BOX 23804 OAKLAND, CA 94623 Date(s) debt was incurred <u>3/7/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$45,515.99
3.29	Nonpriority creditor's name and mailing address ALLIED BARTON SECURITY SERVICE 161 WASHINGTON ST., SUITE 600 EIGHT TOWER BRIDGE CONSHOCKEN, PA 19428 Date(s) debt was incurred <u>2/16/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$39,862.04
3.30	Nonpriority creditor's name and mailing address ALLIED ELECTRONICS INC 7151 JACK NEWELL BLVD S FORT WORTH, TX 76118 Date(s) debt was incurred <u>10/13/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$247.88
3.31	Nonpriority creditor's name and mailing address ALLIED UNIVERSAL SECURITY SERV 161 WASHINGTON STREET SUITE 600 CONSHOCKEN, PA 19428 Date(s) debt was incurred <u>3/30/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$79,232.91
3.32	Nonpriority creditor's name and mailing address AMCLYDE 240 E PALTO BLVD St PAUL, MN 55107 Date(s) debt was incurred <u>5/19/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,053.00

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3.33	Nonpriority creditor's name and mailing address AMERGENT 3553 ATLANTIC AVE, STE A158 Long BEACH, CA 90807 Date(s) debt was incurred <u>12/21/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,818.43
3.34	Nonpriority creditor's name and mailing address American Arbitration 120 Broadway 21st Floor New York, NY 10271 Date(s) debt was incurred <u>11/28/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,250.00
3.35	Nonpriority creditor's name and mailing address AMERICAN METAL BEARING CO 7191 ACACIA AVE GARDEN GROVE, CA 92841-3907 Date(s) debt was incurred <u>12/21/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,727.26
3.36	Nonpriority creditor's name and mailing address AMERICAN SCAFFOLD PO BOX 13835 SAN DIEGO, CA 92710 Date(s) debt was incurred <u>8/4/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$119,427.30
3.37	Nonpriority creditor's name and mailing address AMERICAN TEXTILE & SUPPLY PO BOX 7000 SAN PABLO, CA 94806-7000 Date(s) debt was incurred <u>2/23/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$596.76
3.38	Nonpriority creditor's name and mailing address AMERICAN VULKAN CORPORATION 2525 DUNDEE ROAD WINTER HAVEN, FL 33884 Date(s) debt was incurred <u>1/24/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,983.43
3.39	Nonpriority creditor's name and mailing address AMEX PO Box 650448 Dallas, TX 75265-0448 Date(s) debt was incurred <u>11/1/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$542.99

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3.40	Nonpriority creditor's name and mailing address AMNAV PO BOX 6578 Carol STREAM, IL 60197 Date(s) debt was incurred <u>10/31/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,300.00
3.41	Nonpriority creditor's name and mailing address AMNAV 201 BURMA RD Rd OAKLAND, CA 94607 Date(s) debt was incurred <u>12/6/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,300.00
3.42	Nonpriority creditor's name and mailing address AmNav Maritime #4945755304 201 Burma Road Oakland, CA 94607 Date(s) debt was incurred <u>12/6/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$50,600.00
3.43	Nonpriority creditor's name and mailing address AMNAV MARITIME CORPORATION 201 BURMA ROAD OAKLAND, CA 94607 Date(s) debt was incurred <u>10/31/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$95,450.00
3.44	Nonpriority creditor's name and mailing address ANCHOR QEA, LLC 720 OLIVE WAY SUITE 1900 SEATTLE, WA 98101 Date(s) debt was incurred <u>5/5/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,586.00
3.45	Nonpriority creditor's name and mailing address ANDERSON HUNTER LAW FIRM, P.S. PO BOX 5397 EVERETT, WA 98206 Date(s) debt was incurred <u>9/6/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,282.48
3.46	Nonpriority creditor's name and mailing address Anita's Interiors, Inc. 3418 Pacific Hwy Tacoma, WA 98418 Date(s) debt was incurred <u>10/20/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17,971.00

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3.47	Nonpriority creditor's name and mailing address APPLETON MARINE, INC. 3030 E PERSHING ST APPLETON, WI 54911-8671 Date(s) debt was incurred <u>1/24/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$58,426.02
3.48	Nonpriority creditor's name and mailing address APPLIED INDUSTRIAL TECH P.O. BOX 100538 PASADENA, CA 91189 Date(s) debt was incurred <u>6/23/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,254.01
3.49	Nonpriority creditor's name and mailing address ARAMARK PO BOX 101179 PASADENA, CA 91189 Date(s) debt was incurred <u>10/5/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,568.02
3.50	Nonpriority creditor's name and mailing address ARAMARK REFRESHMENT SERVICES 41460 CHRISTY ST FREMONT, CA 94538 Date(s) debt was incurred <u>6/16/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,138.25
3.51	Nonpriority creditor's name and mailing address ARC DOCUMENT SOLUTIONS LLC PO BOX 192224 SAN FRANCISCO, CA 94119-2224 Date(s) debt was incurred <u>12/22/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,182.27
3.52	Nonpriority creditor's name and mailing address ARCHBRIGHT 5601 6TH AVENUE SOUTH SUITE 400 SEATTLE, WA 98108 Date(s) debt was incurred <u>8/31/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$31,211.10
3.53	Nonpriority creditor's name and mailing address ARCHIE MCFAUL COMPASS ADJUSTER 202 REDONDO DRIVE PITTSBURG, CA 94565-5931 Date(s) debt was incurred <u>3/2/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,900.00

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3.54	Nonpriority creditor's name and mailing address ASKEW INDUSTRIAL CORP 13071 ARCTIC CIRCLE SANTA FE SPRINGS, CA 90670 Date(s) debt was incurred <u>6/8/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,741.30
3.55	Nonpriority creditor's name and mailing address AT&T PO BOX 5025 CAROL STREAM, IL 60197-5025 Date(s) debt was incurred <u>6/19/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,591.90
3.56	Nonpriority creditor's name and mailing address AVALON LOGO WEAR 25182 KERRI LN RAMONA, CA 92065-4741 Date(s) debt was incurred <u>2/5/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,321.92
3.57	Nonpriority creditor's name and mailing address BAE Systems Ship Repair Inc. Attn: Ian T. Graham 1101 Wilson Blvd., Suite 2000 Arlington, VA 22209 Date(s) debt was incurred <u>5/28/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$769,000.00
3.58	Nonpriority creditor's name and mailing address BALANCING SERVICES 5512 6TH AVE S SEATTLE, WA 98108 Date(s) debt was incurred <u>8/23/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$859.50
3.59	Nonpriority creditor's name and mailing address BARRON HEATING & AIR COND. INC 5100 PACIFIC HWY FERNDALE, WA 98248 Date(s) debt was incurred <u>10/5/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$503.69
3.60	Nonpriority creditor's name and mailing address BAUER MOYNIHAN 2101 FOURTH ST SUITE 2400 SEATTLE, WA 98121 Date(s) debt was incurred <u>10/6/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$379.00

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3.61	Nonpriority creditor's name and mailing address BAY PROPELLER 2900 MAIN ST SUITE 2100 ALAMEDA, CA 94501-7739 Date(s) debt was incurred <u>1/30/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,260.00
3.62	Nonpriority creditor's name and mailing address BAY SHRED PO BOX 131681 Carlsbad, CA 92013 Date(s) debt was incurred <u>1/2/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$63.00
3.63	Nonpriority creditor's name and mailing address BAY VALVE SERVICE & ENGINEERIN 3948 TEAL COURT BENICIA, CA 94510-1202 Date(s) debt was incurred <u>6/30/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,170.85
3.64	Nonpriority creditor's name and mailing address BECK ELECTRIC SUPPLY 2775 GOODRICK AVE RICHMOND, CA 94801 Date(s) debt was incurred <u>12/23/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,692.29
3.65	Nonpriority creditor's name and mailing address BELZONA TECHNOLOGY OF WA 22021 W. BOSTIAN RD A2 WOODINVILLE, WA 98072 Date(s) debt was incurred <u>8/15/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,424.88
3.66	Nonpriority creditor's name and mailing address BERG SCAFFOLDING CO, INC. 2130 EAST D STREET TACOMA, WA 98421 Date(s) debt was incurred <u>5/15/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7.31
3.67	Nonpriority creditor's name and mailing address BFG Marine 200 Candlewood Rd Bay Shore, NY 11706 Date(s) debt was incurred <u>3/6/2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$335.55

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3.68	Nonpriority creditor's name and mailing address BIG DOG CITY CORP 2060 NEWCOMB AVE SAN FRANCISCO, CA 94124 Date(s) debt was incurred <u>3/31/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$421.35
3.69	Nonpriority creditor's name and mailing address BIG DOG CITY CORPORATION 2060 NEWCOMB AVENUE SAN FRANCISCO, CA 94124 Date(s) debt was incurred <u>12/31/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$406.94
3.70	Nonpriority creditor's name and mailing address BIRCH EQUIPMENT RENTAL & SALES PO BOX 30918 BELLINGHAM, WA 98228 Date(s) debt was incurred <u>7/31/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,778.47
3.71	Nonpriority creditor's name and mailing address BLACK & DECKER (U.S.) INC DEPT CH 14231 PALATINE, IL 60055-4231 Date(s) debt was incurred <u>1/31/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$61.00
3.72	Nonpriority creditor's name and mailing address BLAST ONE INTERNATIONAL 2400 LANDMARK WAY COLUMBUS, OH 43219 Date(s) debt was incurred <u>9/28/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$141,420.78
3.73	Nonpriority creditor's name and mailing address BOA OLD BAE CHARGES 100 N. Tyron Street Charlotte, NC 28255 Date(s) debt was incurred <u>6/13/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,630.79
3.74	Nonpriority creditor's name and mailing address Boilermaker-Blacksmith Ntl Pen IBB Local #549 754 Minnesota Avenue Kansas City, KS 66101-2766 Date(s) debt was incurred <u>5/28/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

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3.75	Nonpriority creditor's name and mailing address BRADLEY'S PLASTIC BAG CO. 9130 FIRESTONE BLVD DOWNEY, CA 90241-5319 Date(s) debt was incurred <u>12/16/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$918.00
3.76	Nonpriority creditor's name and mailing address BRENNA CRAIN 7 GRANITE CIRCLE BELLINGHAM, WA 98229 Date(s) debt was incurred <u>10/26/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,700.00
3.77	Nonpriority creditor's name and mailing address Bridgewell Resources #0228618001 PO Box 23372 Tigard, OR 97281 Date(s) debt was incurred <u>3/3/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,870.00
3.78	Nonpriority creditor's name and mailing address BRUCE S. ROSENBLATT & ASSOC. 2201 BDWY SUITE 504 OAKLAND, CA 94612-3068 Date(s) debt was incurred <u>3/8/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,791.62
3.79	Nonpriority creditor's name and mailing address BUCKY'S FIFE 4600 PACIFIC HWY E. FIFE, WA 98424 Date(s) debt was incurred <u>7/25/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,070.08
3.80	Nonpriority creditor's name and mailing address BUILDERS ALLIANCE 3801 HANNEGAN RD BELLINGHAM, WA 98226 Date(s) debt was incurred <u>10/11/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,397.59
3.81	Nonpriority creditor's name and mailing address BUSINESS PRINTING COMPANY, INC PO BOX 19786 1965 GILLESPIE WAY #103 EL CAJON, CA 92020 Date(s) debt was incurred <u>2/28/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$785.00

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3.82	Nonpriority creditor's name and mailing address C-MAP NORWAY AS PO BOX 212 4379 EGERSUND FRANCISCO, NORWAY Date(s) debt was incurred <u>1/22/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,914.00
3.83	Nonpriority creditor's name and mailing address CALCO FENCE, INC 4568 CONTRACTORS PL LIVERMORE, CA 94551-4805 Date(s) debt was incurred <u>12/22/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,351.00
3.84	Nonpriority creditor's name and mailing address CALIFORNIA SERVICE TOOL, INC 3875 BAY CENTER PL HAYWARD, CA 94545 Date(s) debt was incurred <u>12/21/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$338.77
3.85	Nonpriority creditor's name and mailing address CARPENTER RIGGING & SUPPLY 222 NAPOLEON STREET SAN FRANCISCO, CA 94124 Date(s) debt was incurred <u>2/15/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$235.66
3.86	Nonpriority creditor's name and mailing address CARTER LEDYARD & MILBURN LLP 2 WALL ST NEW YORK, NY 10005 Date(s) debt was incurred <u>8/8/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$27,145.94
3.87	Nonpriority creditor's name and mailing address CASCADE ENGINEERING SERVICES, 6640 185TH AVE NE REDMOND, WA 98052 Date(s) debt was incurred <u>9/29/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,505.90
3.88	Nonpriority creditor's name and mailing address CASCADE FRICTION MATERIALS INC 314 EAST PUYALLUP TACOMA, WA 98421-1387 Date(s) debt was incurred <u>9/21/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,001.55

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3.89	Nonpriority creditor's name and mailing address CASCADE METALLURGICAL, INC PO BOX 848 KENT, WA 98035-0848 Date(s) debt was incurred <u>8/10/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$350.00
3.90	Nonpriority creditor's name and mailing address CASCADE NATURAL GAS PO BOX 990065 BOISE, ID 83799 Date(s) debt was incurred <u>10/11/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10.76
3.91	Nonpriority creditor's name and mailing address CASCADE NATURAL GAS PO BOX 990065 BOISE, ID 83799 Date(s) debt was incurred <u>10/5/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$530.15
3.92	Nonpriority creditor's name and mailing address CASCADE NATURAL GAS PO BOX 990065 BOISE, ID 83799 Date(s) debt was incurred <u>10/5/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,589.87
3.93	Nonpriority creditor's name and mailing address CASCADE NATURAL GAS PO BOX 990065 BOISE, ID 83799 Date(s) debt was incurred <u>10/5/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$467.75
3.94	Nonpriority creditor's name and mailing address Cascade Natural Gas PO Box 5600 Bismark, ND 58506 Date(s) debt was incurred <u>3/7/2018</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,013.11
3.95	Nonpriority creditor's name and mailing address CDTFA (BOE) PO Box 942879 450 N Street Sacramento, CA 94279 Date(s) debt was incurred <u>2/2/2018</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,117.00

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3.96	Nonpriority creditor's name and mailing address CENTER HARDWARE COMPANY, INC 3003 THIRD STREET SAN FRANCISCO, CA 94107-2500 Date(s) debt was incurred <u>12/16/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$549.10
3.97	Nonpriority creditor's name and mailing address CENTRAL WELDING SUPPLY PO BOX 179 NORTH LAKEWOOD, WA 98259 Date(s) debt was incurred <u>8/30/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$290.01
3.98	Nonpriority creditor's name and mailing address CENTURYLINK PO BOX 91155 SEATTLE, WA 98111 Date(s) debt was incurred <u>10/10/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$232.28
3.99	Nonpriority creditor's name and mailing address CERTIFIED INSPECTION SERVICES 1069 SW 328TH COURT FEDERAL WAY, WA 98023 Date(s) debt was incurred <u>8/21/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,766.45
3.100	Nonpriority creditor's name and mailing address CESCO 7251 CROSS COUNTY ROAD NORTH CHARLESTON, SC 29418 Date(s) debt was incurred <u>4/18/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$959.12
3.101	Nonpriority creditor's name and mailing address Chapel Steel PO Box 951928 DALLAS, TX 75395-1928 Date(s) debt was incurred <u>2/7/2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,555.00
3.102	Nonpriority creditor's name and mailing address CHARTER INDUSTRIAL SUPPLY 7832 OSTROW ST SAN DIEGO, CA 92111 Date(s) debt was incurred <u>12/14/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,074.50

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3.103	Nonpriority creditor's name and mailing address CINCINNATI INC. PO BOX 44719 MADISON, WI 53744-4719 Date(s) debt was incurred <u>3/3/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,521.88
3.104	Nonpriority creditor's name and mailing address CINTAS 7700 BENT BRANCH DR. STE 130 Ste IRVING, TX 75063 Date(s) debt was incurred <u>11/18/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$252.17
3.105	Nonpriority creditor's name and mailing address CINTAS CORPORATION 7700 BENT BRANCH DRIVE STE 130 IRVING, TX 75063 Date(s) debt was incurred <u>12/16/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,067.61
3.106	Nonpriority creditor's name and mailing address CITY GLASS AND UPHOLSTERY 1943 TACOMA AVENUE SOUTH TACOMA, WA 98402 Date(s) debt was incurred <u>11/30/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$254.60
3.107	Nonpriority creditor's name and mailing address CITY OF BELLINGHAM UTILITY PAYMENT PO BOX 35012 SEATTLE, WA 98124 Date(s) debt was incurred <u>10/17/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$578.58
3.108	Nonpriority creditor's name and mailing address CITY OF SEATTLE FIRE DEPT 220 THIRD AVE S SEATTLE, WA 98104 Date(s) debt was incurred <u>8/30/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$950.50
3.109	Nonpriority creditor's name and mailing address CITY TREASURER PO BOX 11010 Tacoma, WA 98411 Date(s) debt was incurred <u>9/26/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$96.93

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3.110	Nonpriority creditor's name and mailing address CLEAN HARBORS ENVIRONMENTAL SE PO BOX 3442 BOSTON, MA 02241-3442 Date(s) debt was incurred <u>8/10/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,382.40
3.111	Nonpriority creditor's name and mailing address CLEAN WATER 306A FRONT STREET LYNEN, WA 98264 Date(s) debt was incurred <u>9/12/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$384.80
3.112	Nonpriority creditor's name and mailing address CLICK NETWORK PO BOX 11625 TACOMA, WA 98411 Date(s) debt was incurred <u>10/14/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$79.79
3.113	Nonpriority creditor's name and mailing address Clyde & Co. RE: Princess Cruise Lines 101 Second Street 24th Floor San Francisco, CA 94105 Date(s) debt was incurred <u>5/28/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$803,418.00
3.114	Nonpriority creditor's name and mailing address COAST CRANE COMPANY DEPT 33655 PO BOX 39000 SAN FRANCISCO, CA 94139 Date(s) debt was incurred <u>1/26/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,638.81
3.115	Nonpriority creditor's name and mailing address COAST MARINE & IND SUPPLY 1480 BANCROFT AVENUE SAN FRANCISCO, CA 94124 Date(s) debt was incurred <u>9/9/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,958.34
3.116	Nonpriority creditor's name and mailing address COAST PRODUCTS INC. 954 ELLIOT AVE. WEST SEATTLE, WA 98119 Date(s) debt was incurred <u>8/29/2014</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$95.80

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3.117	Nonpriority creditor's name and mailing address COHO MARINE PO BOX 16235 SEATTLE, WA 98116 Date(s) debt was incurred <u>6/19/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$330.00
3.118	Nonpriority creditor's name and mailing address COLUMBIA-SENTINEL ENGINEERS 4000 DELDRIDGE WAY SW STE 300 SEATTLE, WA 98106 Date(s) debt was incurred <u>7/31/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,027.22
3.119	Nonpriority creditor's name and mailing address COMMENCEMENT BAY MARIN 820 E D ST TACOMA, WA 98421 Date(s) debt was incurred <u>3/5/2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$100.19
3.120	Nonpriority creditor's name and mailing address COMPASS WATER SOLUTIONS INC 15542 MOSHER AVE TUSTIN, CA 92780 Date(s) debt was incurred <u>2/17/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$42,083.63
3.121	Nonpriority creditor's name and mailing address CONCENTRA PO BOX 3700 Rancho CUCAMONGA, CA 91729 Date(s) debt was incurred <u>5/4/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$45.25
3.122	Nonpriority creditor's name and mailing address CONCENTRA PO BOX 3700 Rancho CUCAMONGA, CA 91729 Date(s) debt was incurred <u>1/10/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,273.05
3.123	Nonpriority creditor's name and mailing address CONCENTRA PO BOX 3700 Rancho CUCAMONGA, CA 91729 Date(s) debt was incurred <u>1/18/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$399.20

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3.124	Nonpriority creditor's name and mailing address CONCENTRA PO BOX 3700 Rancho CUCAMONGA, CA 91729 Date(s) debt was incurred <u>2/1/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$255.70
3.125	Nonpriority creditor's name and mailing address CONCENTRA PO BOX 3700 Rancho CUCAMONGA, CA 91729 Date(s) debt was incurred <u>5/4/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$45.25
3.126	Nonpriority creditor's name and mailing address CONCENTRA PO BOX 3700 RANCHO CUCAMONGA, CA 91729 Date(s) debt was incurred <u>4/17/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$153.63
3.127	Nonpriority creditor's name and mailing address CONOCO 76 PO BOX 530970 ATLANTA, GA 30353 Date(s) debt was incurred <u>10/4/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1.00
3.128	Nonpriority creditor's name and mailing address CONSOLIDATED ELECTRICAL DIST. 901 CENTER STREET TACOMA, WA 98409 Date(s) debt was incurred <u>11/7/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,467.14
3.129	Nonpriority creditor's name and mailing address CONSTRUCTION SUPPLY CO, INC. 201 YORK ST BELLINGHAM, WA 98225 Date(s) debt was incurred <u>10/31/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$217.70
3.130	Nonpriority creditor's name and mailing address CONSTRUCTION SUPPLY CO, INC. 201 YORK ST BELLINGHAM, WA 98225 Date(s) debt was incurred <u>11/12/2013</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$226.95

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3.131	Nonpriority creditor's name and mailing address CONTROLLED DEHUMIDIFICATION 5931 FORD COURT BRIGHTON, MI 48116 Date(s) debt was incurred <u>8/10/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,725.00
3.132	Nonpriority creditor's name and mailing address COPY WRIGHTS 5715 PACIFIC HWY E Tacoma, WA 98424 Date(s) debt was incurred <u>8/22/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$179.82
3.133	Nonpriority creditor's name and mailing address CSI PAINT 257 WALNUT ST NAPA, CA 94559 Date(s) debt was incurred <u>3/30/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,309.90
3.134	Nonpriority creditor's name and mailing address CT CORPORATION PO BOX 4349 Carol Stream, IL 60197 Date(s) debt was incurred <u>6/16/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$429.00
3.135	Nonpriority creditor's name and mailing address CT CORPORATION PO BOX 4349 Carol Stream, IL 60197 Date(s) debt was incurred <u>6/1/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$439.00
3.136	Nonpriority creditor's name and mailing address CURTIN MARITIME 1500 PIER C ST Long Beach, CA 90813 Date(s) debt was incurred <u>1/18/2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$750.00
3.137	Nonpriority creditor's name and mailing address CUSTOM SHIP INTERIORS, INC PO BOX 882 SOLOMONS, MD 20688 Date(s) debt was incurred <u>2/16/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$121,348.00

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3.138	Nonpriority creditor's name and mailing address D & B TRUCKING 1905 E. LINCOLN AVENUE TACOMA, WA 98421 Date(s) debt was incurred <u>12/15/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$441.51
3.139	Nonpriority creditor's name and mailing address D&G MECHANICAL INSULATION PO BOX 1330 Sumner, WA 98390-9998 Date(s) debt was incurred <u>11/14/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,925.31
3.140	Nonpriority creditor's name and mailing address David A. Soles RE: North Coast Electric 1416 E. Thomas Street SEATTLE, WA 98112 Date(s) debt was incurred <u>4/7/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,325.60
3.141	Nonpriority creditor's name and mailing address DEPT OF LABOR & INDUSTRIES BOILER, PRESSURE VESSEL PO BOX 44410 Olympia, WA 98504-4410 Date(s) debt was incurred <u>2/14/2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$451.80
3.142	Nonpriority creditor's name and mailing address DEPT OF LABOR & INDUSTRIES PO BOX 34974 SEATTLE, WA 98124 Date(s) debt was incurred <u>10/17/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25.00
3.143	Nonpriority creditor's name and mailing address DESIGN SPACE PO BOX 31001 Pasadena, CA 91110 Date(s) debt was incurred <u>8/18/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,344.09
3.144	Nonpriority creditor's name and mailing address DESIGN SPACE PO BOX 31001 Pasadena, CA 91110 Date(s) debt was incurred <u>7/14/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,344.09

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3.145	Nonpriority creditor's name and mailing address DESIGN SPACE PO BOX 31001 Pasadena, CA 91110 Date(s) debt was incurred <u>7/14/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$754.14
3.146	Nonpriority creditor's name and mailing address DESIGN SPACE MODULAR BLDGS 2725 FITZGERALD DR. DIXON, CA 95260 Date(s) debt was incurred <u>6/16/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,767.06
3.147	Nonpriority creditor's name and mailing address DHL 16592 COLLECTIONS CENTER DR Chicago, IL 60693 Date(s) debt was incurred <u>1/17/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$72.47
3.148	Nonpriority creditor's name and mailing address DIABLO TROPHIES & AWARDS 1922 CONTRA COSTA BLVD Pleasant Hill, CA 94523 Date(s) debt was incurred <u>9/6/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$202.93
3.149	Nonpriority creditor's name and mailing address DIEHL ENGINEERING, INC PO BOX 1573 KINGSTON, WA 98346 Date(s) debt was incurred <u>9/7/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$23,250.00
3.150	Nonpriority creditor's name and mailing address DIMENSIONAL SILK SCREEN 3750 DALBERGIA ST SAN DIEGO, CA 92113 Date(s) debt was incurred <u>9/30/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$840.64
3.151	Nonpriority creditor's name and mailing address DIRECT TV PO BOX 105249 ATLANTA, GA 30348-5249 Date(s) debt was incurred <u>11/5/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$72.74

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3.152	Nonpriority creditor's name and mailing address DISTRIBUTION INTERNATIONAL 9000 RAILWOOD DR HOUSTON, TX 77078 Date(s) debt was incurred <u>4/17/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$268.00
3.153	Nonpriority creditor's name and mailing address DME INC 14001 MARQUARDT AVE SANTA FE SPRINGS, CA 90670 Date(s) debt was incurred <u>6/15/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$602.39
3.154	Nonpriority creditor's name and mailing address DMH INDUSTRIAL 2701 HEWITT AVE EVERETT, WA 98201 Date(s) debt was incurred <u>5/25/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,086.00
3.155	Nonpriority creditor's name and mailing address DMV 1377 Fell Street SAN FRANCISCO, CA 94117 Date(s) debt was incurred <u>7/31/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$322.00
3.156	Nonpriority creditor's name and mailing address DRS MARINE INC 525 CHESTNUT ST VALLEJO, CA 94590 Date(s) debt was incurred <u>12/29/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$33,741.00
3.157	Nonpriority creditor's name and mailing address DUNLAP TOWING PO BOX 593 LA CONNER, WA 98257 Date(s) debt was incurred <u>9/8/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,529.10
3.158	Nonpriority creditor's name and mailing address EAGLE HYDRAULICS 1308 W MAIN ST AUBURN, WA 98001 Date(s) debt was incurred <u>8/7/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$34,966.04

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3.159	Nonpriority creditor's name and mailing address EDGE ANALYTICAL 1620 S WALNUT ST BURLINGTON, WA 98233 Date(s) debt was incurred <u>6/30/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$800.00
3.160	Nonpriority creditor's name and mailing address EDGE INSPECTION GROUP, INC 4576 E 2ND ST SUITE C BENICIA, CA 94510 Date(s) debt was incurred <u>2/1/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,973.40
3.161	Nonpriority creditor's name and mailing address ELECTRIC MOTOR SERVICE, LLC 1928 MILWAUKEE WAY TACOMA, WA 98421 Date(s) debt was incurred <u>10/6/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,980.00
3.162	Nonpriority creditor's name and mailing address ELECTRO RENT CORP. PO BOX 198582 ATLANTA, CA 30384 Date(s) debt was incurred <u>6/7/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$639.16
3.163	Nonpriority creditor's name and mailing address ELLIOTT BAY DESIGN GROUP 5305 SHILSHOLE AVE NW SUITE 100 SEATTLE, WA 98107 Date(s) debt was incurred <u>5/23/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,398.75
3.164	Nonpriority creditor's name and mailing address ELTECH ELECTRIC 2123 W ELMORE ST SEATTLE, WA 98199 Date(s) debt was incurred <u>9/25/2015</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.165	Nonpriority creditor's name and mailing address EMERALD SERVICES, INC 2600 NORTH CENTRAL EXPRESSWAY SUITE 200 RICHARDSON, TX 75080 Date(s) debt was incurred <u>8/15/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$970.24

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3.166	Nonpriority creditor's name and mailing address Employment Developent Dept 745 Franklin Street Suite 400 SAN FRANCISCO, CA 94102 Date(s) debt was incurred <u>12/31/2007</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$11,210.27</u>
3.167	Nonpriority creditor's name and mailing address ENVIRONMENTAL RECOVERY SERVICE 13940 LIVE OAK AVE BALDWIN PARK, CA 91706 Date(s) debt was incurred <u>4/27/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$32,958.45</u>
3.168	Nonpriority creditor's name and mailing address ENVIROSERV 13940 LIVE OAK AVENUE BALDWIN PARK, CA 91706 Date(s) debt was incurred <u>9/23/2016</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$915.63</u>
3.169	Nonpriority creditor's name and mailing address ENVIROSERV 13940 LIVE OAK AVENUE BALDWIN PARK, CA 91706 Date(s) debt was incurred <u>4/21/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$715.00</u>
3.170	Nonpriority creditor's name and mailing address ENVIROSERV 13940 LIVE OAK AVENUE BALDWIN PARK, CA 91706 Date(s) debt was incurred <u>4/21/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$4,955.00</u>
3.171	Nonpriority creditor's name and mailing address ENVIROSERV 13940 LIVE OAK AVENUE BALDWIN PARK, CA 91706 Date(s) debt was incurred <u>4/21/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,110.00</u>
3.172	Nonpriority creditor's name and mailing address ENVIROSERV 13940 LIVE OAK AVENUE BALDWIN PARK, CA 91706 Date(s) debt was incurred <u>4/21/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$652.18</u>

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3.173	Nonpriority creditor's name and mailing address EPIC INDUSTRIAL SERVICES, INC 2434 E. 11TH STREET TACOMA, WA 98421 Date(s) debt was incurred <u>8/2/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,846.64
3.174	Nonpriority creditor's name and mailing address ERKER'S AUTO REPAIR 2311 PACIFIC HWY E Tacoma, WA 98424 Date(s) debt was incurred <u>9/28/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,257.53
3.175	Nonpriority creditor's name and mailing address ERSHIGS P.O. BOX 951743 DALLAS, TX 75395 Date(s) debt was incurred <u>6/7/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,539.00
3.176	Nonpriority creditor's name and mailing address EVERETT ENGINEERING PO BOX 12100 EVERETT, WA 98206-2100 Date(s) debt was incurred <u>6/23/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$118,692.00
3.177	Nonpriority creditor's name and mailing address EVERETT STEEL PO BOX 776 EVERETT, WA 98206 Date(s) debt was incurred <u>1/31/2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,121.90
3.178	Nonpriority creditor's name and mailing address EVOQUA 28563 NETWORK PL Chicago, IL 60673 Date(s) debt was incurred <u>1/31/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,935.00
3.179	Nonpriority creditor's name and mailing address EVOQUA 28563 Network Pl. Chicago, IL 60673 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,985.00

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3.180	Nonpriority creditor's name and mailing address EVOQUA WATER TECHNOLOGIES LLC 2 MILLTOWN CT. UNION, NJ 07083 Date(s) debt was incurred <u>2/27/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,889.09
3.181	Nonpriority creditor's name and mailing address EXPRESS SERVICES PO BOX 844277 LOS ANGELES, CA 90084-4277 Date(s) debt was incurred <u>9/6/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,058.90
3.182	Nonpriority creditor's name and mailing address EXPRESS SUPPLY AND STEEL, LLC PO BOX 189 RACELAND, LA 70394-0189 Date(s) debt was incurred <u>12/13/2016</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,285.00
3.183	Nonpriority creditor's name and mailing address FAIRBANKS MORSE ENGINE 7824 COLLECTION CENTER DR CHICAGO, IL 60693 Date(s) debt was incurred <u>2/23/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$237,655.79
3.184	Nonpriority creditor's name and mailing address FAIRLEAD INTEGRATED POWER 912 VENTURES WAY CHESAPEAKE, VA 23320 Date(s) debt was incurred <u>3/24/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,361.00
3.185	Nonpriority creditor's name and mailing address FARWEST STEEL CORPORATION PO BOX 1026 EUGENE, OR 97440 Date(s) debt was incurred <u>7/31/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,612.70
3.186	Nonpriority creditor's name and mailing address FASSMER SERVICES AMERICA, LLC 3650 NW 15TH ST LAUDERHILL, FL 33311 Date(s) debt was incurred <u>5/16/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$140,273.65

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3.187	Nonpriority creditor's name and mailing address FASTCO, INC. 2306 E 11TH STREET Tacoma, WA 98421 Date(s) debt was incurred <u>7/31/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,529.00
3.188	Nonpriority creditor's name and mailing address FASTENAL COMPANY PO BOX 1286 WINONA, MN 55987-1286 Date(s) debt was incurred <u>6/7/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,016.72
3.189	Nonpriority creditor's name and mailing address FEDEX PO BOX 94515 Palatine, IL 60094-4515 Date(s) debt was incurred <u>9/19/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$328.39
3.190	Nonpriority creditor's name and mailing address FEDEX PO BOX 94515 PALATINE, IL 60094-4515 Date(s) debt was incurred <u>10/20/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$73.13
3.191	Nonpriority creditor's name and mailing address FEDEX FREIGHT PO BOX 223125 PITTSBURGH, PA 15251-2125 Date(s) debt was incurred <u>6/16/2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,013.63
3.192	Nonpriority creditor's name and mailing address FERGUSON ENTERPRISES INC.#3007 WOLSELEY INDUSTRIAL GROUP PO BOX 847411 Dallas, TX 75284-7411 Date(s) debt was incurred <u>9/30/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,433.31
3.193	Nonpriority creditor's name and mailing address FIRE DEPARTMENT 901 FAWCETT AVE TACOMA, WA 98402-5699 Date(s) debt was incurred <u>10/9/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$118.00

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3.194	Nonpriority creditor's name and mailing address FIRE KING OF SEATTLE 240 S HOLDEN ST Seattle, WA 98108 Date(s) debt was incurred <u>8/9/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$218.36
3.195	Nonpriority creditor's name and mailing address FITTINGS INC PO BOX 3647 SEATTLE, WA 98134 Date(s) debt was incurred <u>10/17/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,093.44
3.196	Nonpriority creditor's name and mailing address FLAME SPRAY 250 S CHICAGO ST SEATTLE, WA 98108 Date(s) debt was incurred <u>6/2/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,265.00
3.197	Nonpriority creditor's name and mailing address FLEET PRIDE PO BOX 847118 DALLAS, TX 75284-7118 Date(s) debt was incurred <u>12/14/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,327.10
3.198	Nonpriority creditor's name and mailing address FLOY TAG 4616 UNION BAY PLACE NE SEATTLE, WA 98105 Date(s) debt was incurred <u>5/30/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$412.12
3.199	Nonpriority creditor's name and mailing address FLUKE ELECTRONICS PO BOX 9090 EVERETT, WA 98206-9090 Date(s) debt was incurred <u>5/27/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$360.00
3.200	Nonpriority creditor's name and mailing address FOLEY & MANSFIELD 250 MARQUETTE AVE SUITE 1200 MINNEAPOLIS, MN 55401 Date(s) debt was incurred <u>5/24/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$112.50

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3.201	Nonpriority creditor's name and mailing address FRANCISCAN OCCUPATIONAL HEALTH PORT CLINIC PO BOX 31001-1553 PASADENA, CA 91110 Date(s) debt was incurred <u>9/29/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$105.00
3.202	Nonpriority creditor's name and mailing address FREEMAN MARINE EQUIPMENT 28336 HUNTER CREEK ROAD GOLD BEACH, OR 97444 Date(s) debt was incurred <u>6/20/2016</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,415.00
3.203	Nonpriority creditor's name and mailing address FRYER-KNOWLES 205 S DAWSON ST. SEATTLE, WA 98108 Date(s) debt was incurred <u>11/17/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,590.00
3.204	Nonpriority creditor's name and mailing address GAHAGAN & BRYANT ASSOC., INC. 600 MARTIN AVENUE SUITE 200 ROHNERT PARK, CA 94928 Date(s) debt was incurred <u>4/27/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,100.00
3.205	Nonpriority creditor's name and mailing address GARDCO PAUL N. GARDNER CO. IN 316 NE FIRST STREET POMPANO BEACH, FL 33060 Date(s) debt was incurred <u>12/12/2016</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,174.00
3.206	Nonpriority creditor's name and mailing address GARDICO INCORPORATED 4912 14TH AVE NW Seattle, WA 98107 Date(s) debt was incurred <u>9/20/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,423.18
3.207	Nonpriority creditor's name and mailing address GATEWAY CONTROLS 2205 QUEEN STREET BELLINGHAM, WA 98229 Date(s) debt was incurred <u>7/11/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,735.20

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3.208	Nonpriority creditor's name and mailing address GEAR WORKS PO BOX 80886 SEATTLE, WA 98108 Date(s) debt was incurred <u>10/20/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$294.00
3.209	Nonpriority creditor's name and mailing address GILLS ELECTRIC 2410 WEBSTER ST OAKLAND, CA 94612 Date(s) debt was incurred <u>1/30/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,362.51
3.210	Nonpriority creditor's name and mailing address GPA VALUATION 7522 28TH ST ST WEST UNIVERSITY PLACE, WA 98466 Date(s) debt was incurred <u>5/10/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,900.00
3.211	Nonpriority creditor's name and mailing address GRAINGER DEPT. 825105745 PO BOX 419267 KANSAS CITY, MO 64141-6267 Date(s) debt was incurred <u>12/22/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,272.22
3.212	Nonpriority creditor's name and mailing address GRANTHAM ENGINEERING 7807 HILLANDALE DR SAN DIEGO, CA 92120-1508 Date(s) debt was incurred <u>2/1/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,382.25
3.213	Nonpriority creditor's name and mailing address GRATING PACIFIC 2775 FRONT ST Woodburn, OR 97071 Date(s) debt was incurred <u>10/26/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,810.00
3.214	Nonpriority creditor's name and mailing address GREEN MARINE 111 CENTRAL AVE Metarie, LA 70001 Date(s) debt was incurred <u>1/25/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,462.50

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3.215	Nonpriority creditor's name and mailing address GRISWOLD INDUSTRIES DBA CLA-VA PO BOX 1325 NEWPORT BEACH, CA 92659 Date(s) debt was incurred <u>2/3/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,480.00
3.216	Nonpriority creditor's name and mailing address GUARDIAN SECURITY 1743 1ST AVE S SEATTLE, WA 98134 Date(s) debt was incurred <u>2/22/2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$352.44
3.217	Nonpriority creditor's name and mailing address HANSON BRIDGETT 425 MARKET ST 26TH FLOOR SAN FRANCISCO, CA 94105 Date(s) debt was incurred <u>4/28/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,842.50
3.218	Nonpriority creditor's name and mailing address HARBOR ISLAND SUPPLY 230 S CHICAGO ST SEATTLE, WA 98108 Date(s) debt was incurred <u>8/31/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$106.80
3.219	Nonpriority creditor's name and mailing address HARDWARE SALES 2034 JAMES ST BELLINGHAM, WA 98225 Date(s) debt was incurred <u>8/25/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$29,313.70
3.220	Nonpriority creditor's name and mailing address HARDWARE SPECIALTY CO INC 3419 11TH AVE SW SEATTLE, WA 98134 Date(s) debt was incurred <u>12/20/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,123.50
3.221	Nonpriority creditor's name and mailing address HARRIS ELECTRIC 4020 23RD AVE WEST SEATTLE, WA 98119 Date(s) debt was incurred <u>7/17/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$46,747.09

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3.222	Nonpriority creditor's name and mailing address HART HEALTH PO BOX 94044 SEATTLE, WA 98124 Date(s) debt was incurred <u>12/4/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$150.70
3.223	Nonpriority creditor's name and mailing address HAWKEYE PHOTOGRAPHY PO BOX 449 SANTA CLARA, CA 95052 Date(s) debt was incurred <u>12/15/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,685.00
3.224	Nonpriority creditor's name and mailing address HEGER DRY DOCK INC. 531 CONCORD ST HOLLISTON, MA 01746 Date(s) debt was incurred <u>12/13/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,000.00
3.225	Nonpriority creditor's name and mailing address HELIX DESIGN GROUP 6021 12TH STREET EAST SUITE 201 TACOMA, WA 98424 Date(s) debt was incurred <u>6/30/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,704.10
3.226	Nonpriority creditor's name and mailing address HELWIG CARBON PRODUCTS, INC 8900 W TOWER AVENUE MILWAUKEE, WI 53224 Date(s) debt was incurred <u>10/16/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$590.65
3.227	Nonpriority creditor's name and mailing address HERC RENTALS INC. PO BOX 650280 DALLAS, TX 75265-0280 Date(s) debt was incurred <u>7/18/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$117,588.81
3.228	Nonpriority creditor's name and mailing address HERRON VALLEY, INC. BAYSIDE SERVICES PO BOX 216 EVERSON, WA 98247 Date(s) debt was incurred <u>9/1/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,326.24

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3.229	Nonpriority creditor's name and mailing address HOLT OF CALIFORNIA PO BOX 100001 SACRAMENTO, CA 95813 Date(s) debt was incurred <u>1/17/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,384.15
3.230	Nonpriority creditor's name and mailing address HOLT OF CALIFORNIA PO BOX 100001 SACRAMENTO, CA 95813 Date(s) debt was incurred <u>11/15/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,338.72
3.231	Nonpriority creditor's name and mailing address HOME DEPOT CREDIT CARD SERVICE PO BOX 9001043 DEPT 32-2501611390 LOUISVILLE, KY 40290-1043 Date(s) debt was incurred <u>10/5/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$381.59
3.232	Nonpriority creditor's name and mailing address HUB INTERNATIONAL NORTHWEST PO BOX 749672 LOS ANGELES, CA 90074-9672 Date(s) debt was incurred <u>3/23/2018</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,235.00
3.233	Nonpriority creditor's name and mailing address HUBBELL ELECTRIC HEATER CO PO BOX 288 SRATFORD, CT 06615-0288 Date(s) debt was incurred <u>1/30/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,547.88
3.234	Nonpriority creditor's name and mailing address HYDRALIFT AMCLYDE, INC 240 EAST PLATO BLVD Saint Paul, MN 55107 Date(s) debt was incurred <u>5/19/2015</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,053.00
3.235	Nonpriority creditor's name and mailing address IAN-CONRAD BERGAN 1001 E. BELMONT ST. PENSACOLA, FL 32501 Date(s) debt was incurred <u>10/24/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,086.69

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3.236	Nonpriority creditor's name and mailing address IBEW Pac. Coast Pension Fund IBEW Local #6 5 Third Street Suite 525 SAN FRANCISCO, CA 94103-3216 Date(s) debt was incurred <u>5/28/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,128,686.00
3.237	Nonpriority creditor's name and mailing address IMECO, INC 1401 CARPENTER AVE IRON MOUNTAIN, MI 49801 Date(s) debt was incurred <u>5/28/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$205,700.50
3.238	Nonpriority creditor's name and mailing address INDCON LOCKBOX 776046 Chicago, IL 60677 Date(s) debt was incurred <u>2/17/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,418.23
3.239	Nonpriority creditor's name and mailing address INDUSTRIAL CONTAINER SERVICE 749 GALLERIA BLVD Roseville, CA 95678 Date(s) debt was incurred <u>4/13/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$418.42
3.240	Nonpriority creditor's name and mailing address INDUSTRIAL CONTAINER SERVICE 749 GALLERIA BLVD Roseville, CA 95678 Date(s) debt was incurred <u>1/25/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$75.00
3.241	Nonpriority creditor's name and mailing address INDUSTRIAL CONTAINER SERVICE 749 GALLERIA BLVD Roseville, CA 95678 Date(s) debt was incurred <u>12/27/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,729.10
3.242	Nonpriority creditor's name and mailing address INDUSTRIAL CONTAINER SERVICES 749 GALLERIA BLVD Roseville, CA 95678 Date(s) debt was incurred <u>2/17/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,560.60

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3.243	Nonpriority creditor's name and mailing address INDUSTRIAL SAFETY SUPPLY CORPO PO BOX 8686 EMERYVILLE, CA 94662 Date(s) debt was incurred <u>10/26/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,418.23
3.244	Nonpriority creditor's name and mailing address INDUSTRIAL SUPPLY 2314 E BAKerview RD SUITE 101 BELLINGHAM, WA 98226 Date(s) debt was incurred <u>10/9/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,738.88
3.245	Nonpriority creditor's name and mailing address INGENIUM GROUP LLC 2255 BARHAM DR SUITE A ESCONDIDO, CA 92029 Date(s) debt was incurred <u>2/14/2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,173.59
3.246	Nonpriority creditor's name and mailing address INSTRUMART 35 Green Mountain Drive South Burlington, VT 05403 Date(s) debt was incurred <u>6/16/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,103.16
3.247	Nonpriority creditor's name and mailing address Int'l Assoc. of Machinists IAM Local #1414 1300 Connecticut Avenue NW Suite 300 Washington, DC 20036-1711 Date(s) debt was incurred <u>5/28/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,000.00
3.248	Nonpriority creditor's name and mailing address INTEGRA PO BOX 2966 Milwaukee, WI 53201 Date(s) debt was incurred <u>10/8/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$948.58
3.249	Nonpriority creditor's name and mailing address Internal Revenue Service PO Box 37940 Hartford, CT 06176-7940 Date(s) debt was incurred <u>12/31/2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,000.00

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3.250	Nonpriority creditor's name and mailing address International Association of Machinists IAM Local #1414 1300 Connecticut Avenue NW Suite 300 Washington, DC 20036-1711 Date(s) debt was incurred <u>5/28/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,000.00
3.251	Nonpriority creditor's name and mailing address INTERNATIONAL PAINT, LLC PO BOX 847202 DALLAS, TX 75284-7202 Date(s) debt was incurred <u>12/21/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,124.48
3.252	Nonpriority creditor's name and mailing address INTERWEST METALS 2208 PACIFIC HWY E TACOMA, WA 98424 Date(s) debt was incurred <u>8/2/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,577.23
3.253	Nonpriority creditor's name and mailing address INVERTECH, INC. 1404 INDUSTRIAL DRIVE, SUITE 1 SALINE, MI 48176 Date(s) debt was incurred <u>10/4/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$260.00
3.254	Nonpriority creditor's name and mailing address IRON MOUNTAIN 1000 CAMPUS DR Collegeville, PA 19426 Date(s) debt was incurred <u>1/31/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25.12
3.255	Nonpriority creditor's name and mailing address JACOBS 5161 ELLSWORTH ST Chicago, CA 92110 Date(s) debt was incurred <u>3/31/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,600.00
3.256	Nonpriority creditor's name and mailing address JACOBS CONSULTING 5161 ELLSWORTH ST SAN DIEGO, CA 92110 Date(s) debt was incurred <u>3/31/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,780.00

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3.257	Nonpriority creditor's name and mailing address JDI ELECTRICAL SERVICES 624 COMMERCE CT MANTECA, CA 95336 Date(s) debt was incurred <u>4/25/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,989.00
3.258	Nonpriority creditor's name and mailing address JEPPESEN INC. 225 W Santa Clara St Suite 1600 San Jose, CA 95113-1752 Date(s) debt was incurred <u>1/22/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,914.00
3.259	Nonpriority creditor's name and mailing address Johannessen & Associates 5413 Meridian Ave. N. Suite B Seattle, WA 98103-6166 Date(s) debt was incurred <u>3/20/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,477.50
3.260	Nonpriority creditor's name and mailing address JOHN STURM 111 SIOUX DRIVE MOUNT VERNON, WA 98273 Date(s) debt was incurred <u>10/23/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,400.00
3.261	Nonpriority creditor's name and mailing address JOHNSONS HOME & GARDEN 26625 MAPLE VALLEY-BLK DIA RD MAPLE VALLEY, WA 98038 Date(s) debt was incurred <u>8/25/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$81.63
3.262	Nonpriority creditor's name and mailing address JOHNSTONE SUPPLY 2100 Dabney Rd Richmond, VA 23230 Date(s) debt was incurred <u>3/2/2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14.75
3.263	Nonpriority creditor's name and mailing address JOTUN PAINTS, INC. 9203 HIGHWAY 23 BELLE CHASSE, LA 70037 Date(s) debt was incurred <u>11/17/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$51,903.35

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3.264	<p>Nonpriority creditor's name and mailing address KAMAN INDUSTRIAL TECHNOLOGIES FILE 25356 LOS ANGELES, CA 90074-5356 Date(s) debt was incurred <u>7/28/2017</u> Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$70.49</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u> </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.265	<p>Nonpriority creditor's name and mailing address KERN OIL FILTER RECYCLING, LLC 2355 RD SUITE 192 DELANO, CA 93215 Date(s) debt was incurred <u>5/18/2017</u> Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$30,500.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u> </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.266	<p>Nonpriority creditor's name and mailing address KLEEN BLAST A DIVISION OF CANAM MINERALS 50 OAK COURT SUITE 210 DANVILLE, CA 94526 Date(s) debt was incurred <u>8/24/2017</u> Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$196.35</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u> </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.267	<p>Nonpriority creditor's name and mailing address KLEEN BLAST ABRASIVES 50 OAK COURT, STE 210 Ste DANVILLE, CA 94526 Date(s) debt was incurred <u>1/23/2015</u> Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,641.89</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u> </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.268	<p>Nonpriority creditor's name and mailing address KLEEN INDUSTRIAL SERVICES 50 OAK COURT SUITE 210 DANVILLE, CA 94526 Date(s) debt was incurred <u>6/29/2017</u> Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$20,721.79</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u> </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.269	<p>Nonpriority creditor's name and mailing address KNIGHTS ADVANTAGE LLC 22021 W BOSTIAN RD SUITE A2 WOODINVILLE, WA 98072 Date(s) debt was incurred <u>8/17/2017</u> Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$735.84</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u> </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.270	<p>Nonpriority creditor's name and mailing address KOFFLER ELECTRICAL MECHANICAL 527 WHITNEY ST SAN LEANDRO, CA 94577 Date(s) debt was incurred <u>4/28/2017</u> Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,100.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u> </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

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3.271	Nonpriority creditor's name and mailing address KONICA MINOLTA 21719 NETWORK PL CHICAGO, IL 60673-1217 Date(s) debt was incurred <u>12/21/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,270.26
3.272	Nonpriority creditor's name and mailing address KTA-TATOR, INC. 115 TECHNOLOGY DR PITTSBURGH, PA 15275 Date(s) debt was incurred <u>8/16/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$884.58
3.273	Nonpriority creditor's name and mailing address LAMONS PO BOX 203061 DALLAS, TX 75320 Date(s) debt was incurred <u>9/27/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,598.73
3.274	Nonpriority creditor's name and mailing address LARSON GROSS 2211 RIMLAND DR., STE. 422 BELLINGHAM, WA 98226 Date(s) debt was incurred <u>6/30/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$289.22
3.275	Nonpriority creditor's name and mailing address Law Office of Benjamin E Kelly Re: Volt Services Corp 9218 Roosevelt Way NE SEATTLE, WA 98115 Date(s) debt was incurred <u>2/19/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,920.00
3.276	Nonpriority creditor's name and mailing address LES SCHWAB TIRE 3805 IRONGATE RD BELLINGHAM, WA 98226 Date(s) debt was incurred <u>9/1/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$733.89
3.277	Nonpriority creditor's name and mailing address LFS INC 851 COHO WAY BELLINGHAM, WA 98225 Date(s) debt was incurred <u>11/30/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$437.57

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3.278	Nonpriority creditor's name and mailing address LIFTING GEAR HIRE CORP 9925 SOUTH INDUSTRIAL DR Bridgeview, IL 60455 Date(s) debt was incurred <u>1/4/2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$791.35
3.279	Nonpriority creditor's name and mailing address LLOYDS REGISTER QUALITY ASSURA PO BOX 301030 DALLAS, TX 75303-1030 Date(s) debt was incurred <u>6/27/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$875.00
3.280	Nonpriority creditor's name and mailing address LYNDEN SHEET METAL INC 837 EVERGREEN ST Lynden, WA 98264 Date(s) debt was incurred <u>1/26/2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,234.06
3.281	Nonpriority creditor's name and mailing address MACKAY COMMUNICATIONS INC PO BOX 60925 CHARLOTTE, NC 28260 Date(s) debt was incurred <u>5/22/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$58,753.00
3.282	Nonpriority creditor's name and mailing address MADISON COMPANY 27 BUSINESS PARK DRIVE BRANFORD, CT 06405 Date(s) debt was incurred <u>9/15/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,054.40
3.283	Nonpriority creditor's name and mailing address MALLORY SAFETY & SUPPLY PO BOX 2068 LONGVIEW, WA 98632 Date(s) debt was incurred <u>8/1/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,950.16
3.284	Nonpriority creditor's name and mailing address MAN DIESEL 1600A BRITTMOORE RD Houston, TX 77043 Date(s) debt was incurred <u>1/27/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$372,473.78

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3.285	Nonpriority creditor's name and mailing address MARCO 3425 EAST LOCUST ST DAVENPORT, IA 52803 Date(s) debt was incurred <u>1/16/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,852.21
3.286	Nonpriority creditor's name and mailing address Marine Carpenters Pension Fund United Brotherhood of Carpenters Local # 2236 PO Box 2510 San Ramon, CA 94583 Date(s) debt was incurred <u>5/28/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.287	Nonpriority creditor's name and mailing address MARINE EXPRESS INC. 2102 KELLEY CT. PITTSBURG, CA 94565 Date(s) debt was incurred <u>4/6/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,965.50
3.288	Nonpriority creditor's name and mailing address MARINE SYSTEMS, INC. PO BOX 3430 PADUCAH, KY 42002 Date(s) debt was incurred <u>5/25/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$29,452.33
3.289	Nonpriority creditor's name and mailing address MARINE VACUUM SERVICE PO BOX 24263 SEATTLE, WA 98124 Date(s) debt was incurred <u>5/10/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$104,929.75
3.290	Nonpriority creditor's name and mailing address MARK MORRIS ASSOCIATES 907 7TH AVE NORTH EDMONDS, WA 98020 Date(s) debt was incurred <u>1/10/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$836.00
3.291	Nonpriority creditor's name and mailing address MATHESON TRI-GAS INC DEPT LA 23793 Pasadena, CA 91185 Date(s) debt was incurred <u>12/31/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$51.70

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3.292	Nonpriority creditor's name and mailing address MATHESON TRI-GAS INC DEPT 3028 PO BOX 123028 Dallas, TX 75312 Date(s) debt was incurred <u>1/31/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$997.83
3.293	Nonpriority creditor's name and mailing address MATHESON TRI-GAS INC DEPT LA 23793 Pasadena, CA 91185 Date(s) debt was incurred <u>1/31/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$51.70
3.294	Nonpriority creditor's name and mailing address MATTHEWS MECHANICAL 33480 WESTERN AVE UNION CITY, CA 94587 Date(s) debt was incurred <u>2/28/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17,693.04
3.295	Nonpriority creditor's name and mailing address MCCAMPBELL ANALYTICAL, INC 1534 WILLOW PASS ROAD Pittsburg, CA 94565 Date(s) debt was incurred <u>1/9/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$350.00
3.296	Nonpriority creditor's name and mailing address MCCAMPBELL ANALYTICAL, INC 1534 WILLOW PASS ROAD Pittsburg, CA 94565 Date(s) debt was incurred <u>1/10/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$571.00
3.297	Nonpriority creditor's name and mailing address MCCAMPBELL ANALYTICAL, INC 1534 WILLOW PASS ROAD Pittsburg, CA 94565 Date(s) debt was incurred <u>1/18/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$290.00
3.298	Nonpriority creditor's name and mailing address MCCAMPBELL ANALYTICAL, INC 1534 WILLOW PASS ROAD Pittsburg, CA 94565 Date(s) debt was incurred <u>1/17/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$756.00

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3.299	Nonpriority creditor's name and mailing address MCCAMPBELL ANALYTICAL, INC. 1534 WILLOW PASS ROAD Pittsburg, CA 94565 Date(s) debt was incurred <u>1/27/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$72.00
3.300	Nonpriority creditor's name and mailing address MCCAMPBELL ANALYTICAL, INC. 1534 WILLOW PASS ROAD Pittsburg, CA 94565 Date(s) debt was incurred <u>1/30/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$372.00
3.301	Nonpriority creditor's name and mailing address MCCAMPBELL ANALYTICAL, INC. 1534 WILLOW PASS ROAD Pittsburg, CA 94565 Date(s) debt was incurred <u>1/27/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,296.00
3.302	Nonpriority creditor's name and mailing address MCEVOY OIL CO PO BOX 28400 BELLINGHAM, WA 98228 Date(s) debt was incurred <u>10/4/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,611.31
3.303	Nonpriority creditor's name and mailing address MCGUIRE BEARING CO 947 SE MARKET ST PORTLAND, OR 97214 Date(s) debt was incurred <u>7/26/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,657.36
3.304	Nonpriority creditor's name and mailing address MCMaster-CARR SUPPLY CO PO BOX 7690 CHICAGO, IL 60680-7690 Date(s) debt was incurred <u>8/17/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,627.59
3.305	Nonpriority creditor's name and mailing address MD MARINE ELECTRIC 672 EAST 11TH STREET TACOMA, WA 98421 Date(s) debt was incurred <u>10/18/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17,154.88

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3.306	Nonpriority creditor's name and mailing address MECHPRO INC 1320 26TH ST NW #4 Auburn, WA 98001 Date(s) debt was incurred <u>12/27/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$322.50
3.307	Nonpriority creditor's name and mailing address MEDI 4814 E 2ND ST BENICIA, CA 94510 Date(s) debt was incurred <u>10/24/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$320.00
3.308	Nonpriority creditor's name and mailing address MEDICAL ELECTRONIC DEVICES 4814 EAST SECOND ST BENICIA, CA 94510 Date(s) debt was incurred <u>10/24/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$320.00
3.309	Nonpriority creditor's name and mailing address MICAH JAQUAY 1636 AMY CT. BELLINGHAM, WA 98226 Date(s) debt was incurred <u>6/9/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,188.09
3.310	Nonpriority creditor's name and mailing address MIS CONSTRUCTION SOFTWARE, INC 1314 26TH ST EVERETT, WA 98201 Date(s) debt was incurred <u>10/15/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$550.00
3.311	Nonpriority creditor's name and mailing address MISSION JANITORIAL & ABRASIVE 9292 ACTIVITY RD SAN DIEGO, CA 92126-4425 Date(s) debt was incurred <u>12/13/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,984.12
3.312	Nonpriority creditor's name and mailing address MOBILE MODULAR MGMT CORP. MCGR PO BOX 45043 SAN FRANCISCO, CA 94145-0043 Date(s) debt was incurred <u>6/30/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,478.26

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3.313	Nonpriority creditor's name and mailing address Mobile Modular Portable Storag 5700 LAS POSITAS ROAD Livermore, CA 94551 Date(s) debt was incurred <u>1/11/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$113.90
3.314	Nonpriority creditor's name and mailing address MOBILE MODULAR Portable Storag 5700 LAS POSITAS ROAD Livermore, CA 94551 Date(s) debt was incurred <u>7/30/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16.99
3.315	Nonpriority creditor's name and mailing address MONKEYBRAINS 286 12TH ST SAN FRANCISCO, CA 94103 Date(s) debt was incurred <u>2/24/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,000.00
3.316	Nonpriority creditor's name and mailing address MOORE MEDICAL PO BOX 99718 CHICAGO, IL 60696 Date(s) debt was incurred <u>9/22/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$81.56
3.317	Nonpriority creditor's name and mailing address MORSE STEEL 3002 W. ILLINOIS BELLINGHAM, WA 98225 Date(s) debt was incurred <u>10/11/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$62.77
3.318	Nonpriority creditor's name and mailing address MORTON MCGOLDRICK PS PO BOX 1533 TACOMA, WA 98401 Date(s) debt was incurred <u>8/23/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$541.19
3.319	Nonpriority creditor's name and mailing address MOTION INDUSTRIES 28976 HOPKINS ST SUITE H HAYWARD, CA 94545 Date(s) debt was incurred <u>12/26/2013</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,044.09

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3.320	Nonpriority creditor's name and mailing address MOTOR-SERVICES HUGO STAMP 3190 SW 4TH AVE FT LAUDERDALE, FL 33315 Date(s) debt was incurred <u>3/6/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$379,087.43
3.321	Nonpriority creditor's name and mailing address MSC INDUSTRIAL SUPPLY PO BOX 382070 PITTSBURGH, PA 15250 Date(s) debt was incurred <u>7/27/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,008.96
3.322	Nonpriority creditor's name and mailing address MT HOOD FASTENERS PO BOX 14811 PORTLAND, OR 97293 Date(s) debt was incurred <u>9/28/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$54.88
3.323	Nonpriority creditor's name and mailing address MYRIAD INDUSTRIES 3454 E STREET San Diego, CA 92102 Date(s) debt was incurred <u>2/9/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,368.00
3.324	Nonpriority creditor's name and mailing address MYRIAD INDUSTRIES 3454 E STREET San Diego, CA 92102 Date(s) debt was incurred <u>2/1/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,430.00
3.325	Nonpriority creditor's name and mailing address MYRIAD INDUSTRIES 3454 E STREET San Diego, CA 92102 Date(s) debt was incurred <u>2/22/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,938.00
3.326	Nonpriority creditor's name and mailing address NATIONAL SAFETY 6910 S 196TH ST Kent, WA 98032 Date(s) debt was incurred <u>3/23/2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$291.60

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3.327	<p>Nonpriority creditor's name and mailing address NELSON FASTENER SYSTEM 7900 W RIDGE RD. PO BOX 4019 ELYRIA, OH 44036</p> <p>Date(s) debt was incurred <u>9/29/2017</u></p> <p>Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$948.82</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u> </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.328	<p>Nonpriority creditor's name and mailing address NESS CAMPBELL CRANE & RIGGING PO BOX 20517 PORTLAND, OR 97294</p> <p>Date(s) debt was incurred <u>12/7/2017</u></p> <p>Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$19,258.32</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u> </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.329	<p>Nonpriority creditor's name and mailing address NEW PIG CORPORATION ONE PORK AVE TIPTON, PA 16684-0304</p> <p>Date(s) debt was incurred <u>4/13/2017</u></p> <p>Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,614.10</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u> </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.330	<p>Nonpriority creditor's name and mailing address NEWARK ELECTRONICS 300 S. RIVERSIDE PLAZA SUITE 2200 CHICAGO, IL 60606</p> <p>Date(s) debt was incurred <u>6/6/2017</u></p> <p>Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4.17</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u> </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.331	<p>Nonpriority creditor's name and mailing address NORMED PO BOX 3644 SEATTLE, WA 98124</p> <p>Date(s) debt was incurred <u>12/19/2016</u></p> <p>Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$52.29</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u> </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.332	<p>Nonpriority creditor's name and mailing address NORTH AMERICAN CRANE BUREAU 930 WILLISTON PARK POINT LAKE MARY, FL 32746</p> <p>Date(s) debt was incurred <u>9/28/2016</u></p> <p>Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,683.10</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u> </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.333	<p>Nonpriority creditor's name and mailing address North Coast Electric 1836 Racine Street Bellingham, WA 98229</p> <p>Date(s) debt was incurred <u>4/7/2017</u></p> <p>Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,325.60</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u> </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

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3.334	Nonpriority creditor's name and mailing address NORTH COAST ELECTRIC 1836 RACINE ST. BELLINGHAM, WA 98225 Date(s) debt was incurred <u>8/26/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,865.93
3.335	Nonpriority creditor's name and mailing address NORTHWEST MARINE CHEMIST PO BOX 7084 TACOMA, WA 98417 Date(s) debt was incurred <u>10/6/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,005.00
3.336	Nonpriority creditor's name and mailing address NORTHWEST RADIATION SERVICES 11539 PALATINE AVENUE NORTH SEATTLE, WA 98133-8618 Date(s) debt was incurred <u>6/17/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,235.00
3.337	Nonpriority creditor's name and mailing address NORTHWEST WIRE ROPE & SLING CO 1952 MILWAUKEE WAY Tacoma, WA 98421 Date(s) debt was incurred <u>3/9/2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$324.04
3.338	Nonpriority creditor's name and mailing address NORTHWEST WIRE ROPE & SLING CO 1952 MILWAUKEE WAY TACOMA, WA 98421 Date(s) debt was incurred <u>9/13/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17.90
3.339	Nonpriority creditor's name and mailing address NPFVOA VESSEL SAFETY PROGRAM 1900 W EMERSON SUITE 101 Seattle, WA 98119 Date(s) debt was incurred <u>9/20/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$450.00
3.340	Nonpriority creditor's name and mailing address NW STEEL & PIPE, INC. PO BOX 11247 TACOMA, WA 98411 Date(s) debt was incurred <u>9/6/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,922.41

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3.341	Nonpriority creditor's name and mailing address OASYS OFFICE AUTOMATION SYSTEM 1575 PORT DRIVE BURLINGTON, WA 98233 Date(s) debt was incurred <u>10/20/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$982.98
3.342	Nonpriority creditor's name and mailing address OCCUPATIONAL HEALTH CENTERS PO BOX 3700 RANCHO CUCAMONGA, CA 91729 Date(s) debt was incurred <u>3/30/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,057.76
3.343	Nonpriority creditor's name and mailing address OFFICE DEPOT PO BOX 6403 SIOUX FALLS, SD 57117 Date(s) debt was incurred <u>10/17/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$295.74
3.344	Nonpriority creditor's name and mailing address OFFICE DEPOT PO BOX 6403 SIOUX FALLS, SD 57117 Date(s) debt was incurred <u>2016/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,551.84
3.345	Nonpriority creditor's name and mailing address OFFICE DEPOT PO BOX 6403 SIOUX FALLS, SD 57117 Date(s) debt was incurred <u>10/17/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$295.74
3.346	Nonpriority creditor's name and mailing address OFFICE TEAM PO BOX 743295 LOS ANGELES, CA 90074-3294 Date(s) debt was incurred <u>3/6/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$879.84
3.347	Nonpriority creditor's name and mailing address OIL RE-REFINING COMPANY, INC 4150 N SUTTLE RD PORTLAND, OR 97217 Date(s) debt was incurred <u>2/9/2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$457.50

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3.348	Nonpriority creditor's name and mailing address OMNI PACKING & SEAL CO, INC. 132 S ORCAS STREET SEATTLE, WA 98108 Date(s) debt was incurred <u>10/17/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$258.95
3.349	Nonpriority creditor's name and mailing address ONECALL PO BOX 206821 DALLAS, TX 75320 Date(s) debt was incurred <u>12/23/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$356.31
3.350	Nonpriority creditor's name and mailing address Operating Engineers Trust Fund OE Local #3 100 Corson Street Suite 100 Pasadena, CA 91103 Date(s) debt was incurred <u>5/28/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.351	Nonpriority creditor's name and mailing address Pac Coast Shipyards Pen. Fund Laborer's Local #886 PO Box 2510 San Ramon, CA 94583 Date(s) debt was incurred <u>5/28/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.352	Nonpriority creditor's name and mailing address Pac Coast Shipyards Pen. Fund UA Local #38 PO Box 2510 San Ramon, CA 94583 Date(s) debt was incurred <u>5/28/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.353	Nonpriority creditor's name and mailing address Pac Coast Shipyards Pens Fund Sheet Metal Workers Local #104 PO Box 2510 San Ramon, CA 94583 Date(s) debt was incurred <u>5/28/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.354	Nonpriority creditor's name and mailing address Pac. Coast Shipyards Pens Fund Painters Local #1176 PO Box 2510 San Ramon, CA 94583 Date(s) debt was incurred <u>5/28/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

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3.355	Nonpriority creditor's name and mailing address PACIFIC MACHINE INC. 8601 38TH AVE SW LAKEWOOD, WA 98499 Date(s) debt was incurred <u>9/20/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,334.56
3.356	Nonpriority creditor's name and mailing address PACIFIC MACHINERY & TOOL STEEL 3445 NW LUZON ST. PORTLAND, OR 97210-1694 Date(s) debt was incurred <u>10/19/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$467.71
3.357	Nonpriority creditor's name and mailing address PACIFIC OFFICE AUTOMATION 1114 PACIFIC AVENUE TACOMA, WA 98402 Date(s) debt was incurred <u>7/18/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$105.85
3.358	Nonpriority creditor's name and mailing address PACIFIC OFFICE AUTOMATION PO BOX 41602 PHILADELPHIA, PA 19101-1602 Date(s) debt was incurred <u>10/7/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$187.47
3.359	Nonpriority creditor's name and mailing address PACIFIC RADAR 12310 HIGHWAY 99, SUITE 132 EVERETT, WA 98204-7556 Date(s) debt was incurred <u>9/18/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,921.26
3.360	Nonpriority creditor's name and mailing address PACIFIC SECURITY 2009 IRON STREET BELLINGHAM, WA 98225 Date(s) debt was incurred <u>9/30/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$36,432.55
3.361	Nonpriority creditor's name and mailing address PACIFIC WELDING SUPPLIES LLC PO BOX 111240 TACOMA, WA 98411 Date(s) debt was incurred <u>8/15/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$26,645.52

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3.362	Nonpriority creditor's name and mailing address PAPE MATERIAL HANDLING PO BOX 5077 PORTLAND, OR 97208 Date(s) debt was incurred <u>8/31/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,107.20
3.363	Nonpriority creditor's name and mailing address PARAMOUNT SUPPLY CO 2367 LINCOLN AVE TACOMA, WA 98421 Date(s) debt was incurred <u>9/25/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,450.28
3.364	Nonpriority creditor's name and mailing address PARK PRESIDIO 1300 A 25TH ST San Francisco, CA 94107 Date(s) debt was incurred <u>4/28/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,355.63
3.365	Nonpriority creditor's name and mailing address Patenaude & Felix, Law offices 19401 40th Avenue West Ste 280 Lynnwood, WA 98036 Date(s) debt was incurred <u>2/26/2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$304.48
3.366	Nonpriority creditor's name and mailing address PCCI PO BOX 84162 SEATTLE, WA 98124 Date(s) debt was incurred <u>9/14/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,908.19
3.367	Nonpriority creditor's name and mailing address PCS PO BOX 80455 Las VEGAS, NV 89180 Date(s) debt was incurred <u>2/1/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$368.47
3.368	Nonpriority creditor's name and mailing address PDM PO BOX 740965 LOS ANGELES, CA 90074 Date(s) debt was incurred <u>12/31/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$726.02

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3.369	Nonpriority creditor's name and mailing address Pentegra Retirement Services 701 WESTCHESTER AVE SUITE 320E WHITE PLAINS, NY 10604 Date(s) debt was incurred <u>8/10/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,156.25
3.370	Nonpriority creditor's name and mailing address Pentegra Retirement Services 108 Corporate Park Drive White Plains, NY 10604 Date(s) debt was incurred <u>7/11/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,156.25
3.371	Nonpriority creditor's name and mailing address PERFORMANCE CONTRACTING INC. 422 S FOREST STREET SEATTLE, WA 98134 Date(s) debt was incurred <u>9/13/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,305.80
3.372	Nonpriority creditor's name and mailing address PERINE DANFORTH LLC 820 SOUTH ADAMS ST. SEATTLE, WA 98108 Date(s) debt was incurred <u>10/6/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,320.48
3.373	Nonpriority creditor's name and mailing address PETRO CHEM 4403 RUSSELL RD SUITE 108 MUKITEO, WA 98275 Date(s) debt was incurred <u>8/30/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$184,938.50
3.374	Nonpriority creditor's name and mailing address PHILIPS, ERLEWINE, GIVEN & CAR 39 MESA STREET, SUITE 201 THE PRESIDIO SAN FRANCISCO, CA 94129 Date(s) debt was incurred <u>11/15/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$26,811.40
3.375	Nonpriority creditor's name and mailing address PIERCE COUNTY BUDGET & FINANCE 950 Fawcett Ave Suite 100 Tacoma, WA 98402 Date(s) debt was incurred <u>4/1/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,187.21

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3.376	Nonpriority creditor's name and mailing address PIERSIDE COATINGS LLC 4739 UNIVERSITY WAY #160 SEATTLE, WA 98105 Date(s) debt was incurred <u>3/19/2018</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$36,075.00
3.377	Nonpriority creditor's name and mailing address PITNEY BOWES PO BOX 371887 Pittsburgh, PA 15250 Date(s) debt was incurred <u>12/12/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$479.26
3.378	Nonpriority creditor's name and mailing address PLATT ELECTRIC SUPPLY PO BOX 2858 PORTLAND, WA 97208 Date(s) debt was incurred <u>9/15/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$22,480.57
3.379	Nonpriority creditor's name and mailing address POGOZONE INTERNET SERVICES PO BOX 974 LYNDEN, WA 98264 Date(s) debt was incurred <u>10/15/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,060.70
3.380	Nonpriority creditor's name and mailing address PORT OF BELLINGHAM 1801 ROEDER AVE PO BOX 1677 BELLINGHAM, WA 98227 Date(s) debt was incurred <u>10/1/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$132,936.91
3.381	Nonpriority creditor's name and mailing address PORT OF SAN FRANCISCO PO BOX 7862 SAN FRANCISCO, CA 94120-7862 Date(s) debt was incurred <u>8/1/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$742,887.40
3.382	Nonpriority creditor's name and mailing address PORTLAND AT ST. PAUL, LLC PO BOX 2015 TACOMA, WA 98401 Date(s) debt was incurred <u>7/28/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,280.15

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3.383	Nonpriority creditor's name and mailing address PPG ARCHITECTURAL FINISHES PO BOX 842409 BOSTON, MA 02284-2409 Date(s) debt was incurred <u>10/19/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,165.74
3.384	Nonpriority creditor's name and mailing address PRAXAIR DISTRIBUTION INC. PO BOX 120812 DEPT 0812 DALLAS, TX 75312 Date(s) debt was incurred <u>8/22/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$31,760.40
3.385	Nonpriority creditor's name and mailing address Princess Cruise Lines, Ltd 24305 Town Center Drive Santa Clarita, CA 91355 Date(s) debt was incurred <u>5/28/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$803,418.00
3.386	Nonpriority creditor's name and mailing address PROBUILD PO BOX 2009 MILTON, WA 98354 Date(s) debt was incurred <u>10/12/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$640.26
3.387	Nonpriority creditor's name and mailing address PROEST SOFTWARE, INC 17065 CAMINO SAN BERNARDO SUITE 150 SAN DIEGO, CA 92127 Date(s) debt was incurred <u>10/23/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,990.00
3.388	Nonpriority creditor's name and mailing address PUGET SOUND CLEAN AIR AGENCY 1904 THIRD AVE SUITE 105 SEATTLE, WA 98101 Date(s) debt was incurred <u>11/20/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,150.00
3.389	Nonpriority creditor's name and mailing address PUGET SOUND ENERGY BOT-01H PO BOX 91269 BELLEVUE, WA 98009 Date(s) debt was incurred <u>10/11/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,899.15

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3.390	Nonpriority creditor's name and mailing address PUGET SOUND PIPE & SUPPLY CO. PO BOX 97010 KENT, WA 98064 Date(s) debt was incurred <u>8/21/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,532.74
3.391	Nonpriority creditor's name and mailing address PUMP TECH 12020 SE 32ND STREET SUITE 2 BELLEVUE, WA 98005 Date(s) debt was incurred <u>1/19/2018</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$230.00
3.392	Nonpriority creditor's name and mailing address QUILL.COM PO BOX 37600 PHILADELPHIA, PA 19101-0600 Date(s) debt was incurred <u>9/26/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$572.38
3.393	Nonpriority creditor's name and mailing address R. STAHL, INC 13259 N PROMENADE BLVD STAFFORD, TX 77477 Date(s) debt was incurred <u>5/1/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,822.39
3.394	Nonpriority creditor's name and mailing address R. STAHL, INC 13259 N PROMENADE BLVD STAFFORD, TX 77477 Date(s) debt was incurred <u>2/22/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,822.40
3.395	Nonpriority creditor's name and mailing address RAINIER COLLECTION SERVICES PO Box 3622 Bellevue, WA 98009 Date(s) debt was incurred <u>1/15/2018</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25.00
3.396	Nonpriority creditor's name and mailing address RAINIER ENVIRONMENTAL LAB 5013 PACIFIC HWY SUITE 20 FIFE, WA 98424 Date(s) debt was incurred <u>10/24/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$900.00

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3.397	Nonpriority creditor's name and mailing address RAPID PREP LLC - WA 44 CROSS PARK AVE NORTH KINGSTON, RI 02852 Date(s) debt was incurred <u>9/7/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,517.29
3.398	Nonpriority creditor's name and mailing address RAYMOND HANDLING CONCEPTS 41400 BOYCE ROAD FREMONT, CA 94538 Date(s) debt was incurred <u>6/23/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,198.63
3.399	Nonpriority creditor's name and mailing address READY REFRESH PO BOX 856158 LOUISVILLE, KY 40285-6158 Date(s) debt was incurred <u>2/24/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,432.62
3.400	Nonpriority creditor's name and mailing address Ready Refresh PO Box 856158 Louisville, KY 40285-6158 Date(s) debt was incurred <u>12/22/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$636.72
3.401	Nonpriority creditor's name and mailing address Ready Refresh PO Box 856158 Louisville, KY 40285-6158 Date(s) debt was incurred <u>11/22/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$409.32
3.402	Nonpriority creditor's name and mailing address READY REFRESH PO BOX 856158 Louisville, KY 40285 Date(s) debt was incurred <u>4/22/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,159.74
3.403	Nonpriority creditor's name and mailing address READY REFRESH PO BOX 856158 Louisville, KY 40285 Date(s) debt was incurred <u>5/22/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,159.74

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3.404	Nonpriority creditor's name and mailing address READY REFRESH PO BOX 856158 Louisville, KY 40285 Date(s) debt was incurred <u>6/22/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,159.74
3.405	Nonpriority creditor's name and mailing address READY REFRESH PO BOX 856158 Louisville, KY 40285 Date(s) debt was incurred <u>8/22/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,159.74
3.406	Nonpriority creditor's name and mailing address READY REFRESH PO BOX 856158 Louisville, KY 40285 Date(s) debt was incurred <u>7/22/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,159.74
3.407	Nonpriority creditor's name and mailing address RECOLOGY SUNSET SCAVENGER RECOLOGY GOLDEN GATE 250 EXECUTIVE PARK, SUITE 2100 SAN FRANCISCO, CA 94134-3306 Date(s) debt was incurred <u>1/31/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,205.00
3.408	Nonpriority creditor's name and mailing address RELIANCE METAL CENTER PO BOX 748591 LOS ANGELES, CA 90074-8554 Date(s) debt was incurred <u>12/15/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$24,853.60
3.409	Nonpriority creditor's name and mailing address RELIANT WATER MANAGEMENT 1001 BAYHILL DR 2ND FLOOR SAN BRUNO, CA 94066 Date(s) debt was incurred <u>2/23/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,746.00
3.410	Nonpriority creditor's name and mailing address REPUBLIC BRASS SALES 6566 FEDERAL BLVD LEMON GROVE, CA 91945 Date(s) debt was incurred <u>10/31/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,860.76

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3.411	Nonpriority creditor's name and mailing address RES COM NW, INC 1322 BIRCH BAY LYNDEN RD FERNDAL, WA 98248 Date(s) debt was incurred <u>6/28/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,807.09
3.412	Nonpriority creditor's name and mailing address ROBB PRECISION TOOL SERVICES 2100 196TH ST SW SUITE 144 LYNNWOOD, WA 98036 Date(s) debt was incurred <u>9/1/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$800.00
3.413	Nonpriority creditor's name and mailing address ROBBLEE'S TOTAL SECURITY 751 TACOMA AVE S TACOMA, WA 98402 Date(s) debt was incurred <u>7/14/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$52.47
3.414	Nonpriority creditor's name and mailing address ROBINSON NOBLE 2105 SOUTH C STREET TACOMA, WA 98402 Date(s) debt was incurred <u>5/18/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,930.00
3.415	Nonpriority creditor's name and mailing address ROGERS MACHINERY COMPANY, INC. PO BOX 230429 PORTLAND, OR 97281 Date(s) debt was incurred <u>7/17/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,467.33
3.416	Nonpriority creditor's name and mailing address ROLLS ROYCE MARINE NA 110 NORFOLK ST WALPOLE, MA 02081 Date(s) debt was incurred <u>5/15/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$63,306.50
3.417	Nonpriority creditor's name and mailing address S&S METAL FABRICATION 1551 SO TACOMA WAY TACOMA, WA 98409 Date(s) debt was incurred <u>3/23/2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$305.00

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3.418	Nonpriority creditor's name and mailing address S.D. MEYERS, LLC 180 SOUTH AVE TALLMADGE, OH 44278 Date(s) debt was incurred <u>10/31/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$572.00
3.419	Nonpriority creditor's name and mailing address SAFE-ENTRY TECHNICAL, INC 9300 SANTA ANITA AVE SUITE 105 RANCHO CUCAMONGA, CA 91730 Date(s) debt was incurred <u>12/16/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$707.80
3.420	Nonpriority creditor's name and mailing address SAFETY-KLEEN PO BOX 7170 PASADENA, CA 91109-7170 Date(s) debt was incurred <u>10/17/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$831.41
3.421	Nonpriority creditor's name and mailing address SAFWAY PO BOX 1366 FERNDAL, WA 98248 Date(s) debt was incurred <u>5/22/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,896.41
3.422	Nonpriority creditor's name and mailing address SAFWAY 1660 GILBRETH RD Burlingame, CA 94010 Date(s) debt was incurred <u>2/6/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,900.00
3.423	Nonpriority creditor's name and mailing address SAFWAY SERVICES, LLC 1660 GILBRETH RD BURLINGAME, CA 94010 Date(s) debt was incurred <u>3/27/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$103,896.41
3.424	Nonpriority creditor's name and mailing address San Francisco Public Utilities #60DRG60D-01 1390 Market Street, 7th Floor SAN FRANCISCO, CA 94102-5408 Date(s) debt was incurred <u>5/24/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$244,456.06

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3.425	Nonpriority creditor's name and mailing address San Francisco Tax Collector 1 Dr Carlton B Goodlett Pl Room 140 City Hall SAN FRANCISCO, CA 94102 Date(s) debt was incurred <u>8/28/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$45,000.00
3.426	Nonpriority creditor's name and mailing address San Francisco Tax Collector 1 Dr Carlton B Goodlett Pl Room 140 City Hall SAN FRANCISCO, CA 94102 Date(s) debt was incurred <u>9/21/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$27,947.82
3.427	Nonpriority creditor's name and mailing address San Francisco Tax Collector 1 Dr Carlton B Goodlett Pl Room 140 City Hall SAN FRANCISCO, CA 94102 Date(s) debt was incurred <u>7/11/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,169.08
3.428	Nonpriority creditor's name and mailing address SAN FRANCISCO WATER POWER SEWE ATTN: CSB, RETAIL ELECTRIC 525 GOLDEN GATE AVE, 3RD FLOOR SAN FRANCISCO, CA 94102 Date(s) debt was incurred <u>5/24/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$254,249.41
3.429	Nonpriority creditor's name and mailing address SANITARY SERVICE PO BOX 35008 SEATTLE, WA 98124 Date(s) debt was incurred <u>10/1/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,457.61
3.430	Nonpriority creditor's name and mailing address SCHRADER & SON, LLC 2170 C COMMERCE AVE CONCORD, CA 94520 Date(s) debt was incurred <u>10/20/2016</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,500.00
3.431	Nonpriority creditor's name and mailing address SEACOAST ELECTRIC CO. PO BOX 98059 Chicago, IL 60693 Date(s) debt was incurred <u>2/3/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$686.87

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3.432	Nonpriority creditor's name and mailing address SEAPORT STEEL PO BOX 3625 SEATTLE, WA 98124 Date(s) debt was incurred <u>10/3/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,592.68
3.433	Nonpriority creditor's name and mailing address SF BAR PILOTS PIER 9 EAST END SAN FRANCISCO, CA 94111 Date(s) debt was incurred <u>1/6/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,920.20
3.434	Nonpriority creditor's name and mailing address SF Public Utilities Commissio #60DRG60D-01 1390 Market Street, 7th Floor SAN FRANCISCO, CA 94102-5408 Date(s) debt was incurred <u>5/24/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$244,456.06
3.435	Nonpriority creditor's name and mailing address SGS HERGUTH LABORATORIES, INC. PO BOX 2502 CAROL STREAM, IL 60132-2502 Date(s) debt was incurred <u>2/17/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$37.15
3.436	Nonpriority creditor's name and mailing address SHERWIN WILLIAMS-BELLINGHAM 1401 N STATE ST BELLINGHAM, WA 98225 Date(s) debt was incurred <u>8/1/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$131,639.07
3.437	Nonpriority creditor's name and mailing address SIMPLEX AMERICAS LLC 20 BARTLES CORNER ROAD FLEMINGTON, NJ 08822-5717 Date(s) debt was incurred <u>1/24/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$35,450.00
3.438	Nonpriority creditor's name and mailing address SMITH FIRE SYSTEMS INC 1106 54TH AVE E TACOMA, WA 98424 Date(s) debt was incurred <u>3/15/2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,834.77

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3.439	Nonpriority creditor's name and mailing address SOLID WASTE MANAGEMENT 3510 SOUTH MULLEN ST Tacoma, WA 98409 Date(s) debt was incurred <u>9/30/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$672.94
3.440	Nonpriority creditor's name and mailing address SOUND PROPELLER SERVICES, INC 7916 8TH AVENUE S SEATTLE, WA 98108 Date(s) debt was incurred <u>7/31/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$39.28
3.441	Nonpriority creditor's name and mailing address SOUND TESTING, INC. PO BOX 16204 SEATTLE, WA 98116 Date(s) debt was incurred <u>6/21/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,290.00
3.442	Nonpriority creditor's name and mailing address SPECIAL-T SIGNS AND GRAPHICS 2206 PACIFIC ST. BELLINGHAM, WA 98229 Date(s) debt was incurred <u>10/4/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$89.00
3.443	Nonpriority creditor's name and mailing address SPECTRA LABORATORIES, LLC 2221 ROSS WAY TACOMA, WA 98421 Date(s) debt was incurred <u>9/18/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,969.00
3.444	Nonpriority creditor's name and mailing address SPENCER FLUID POWER 19308 68TH AVE S KENT, WA 98032 Date(s) debt was incurred <u>1/5/2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$91.30
3.445	Nonpriority creditor's name and mailing address SPERRY MARINE A UNIT OF NORTH 1865 INDUSTRIAL BLVD NORTHROP GRUMMAN SPERRY MARINE HARVEY, LA 70058 Date(s) debt was incurred <u>6/22/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,184.56

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3.446	Nonpriority creditor's name and mailing address SPONGE JET 14 PATTERSON LANE NEWINGTON, NH 03801 Date(s) debt was incurred <u>5/9/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,346.07
3.447	Nonpriority creditor's name and mailing address SPRINT PO BOX 219100 KANSAS CITY, MO 64121-9100 Date(s) debt was incurred <u>10/14/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,903.09
3.448	Nonpriority creditor's name and mailing address STELLAR INDUSTRIAL SUPPLY 711 E 11TH STREET TACOMA, WA 98421 Date(s) debt was incurred <u>9/25/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$166.65
3.449	Nonpriority creditor's name and mailing address STERICYCLE PO BOX 6578 CAROL STREAM, IL 60197 Date(s) debt was incurred <u>8/31/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,279.02
3.450	Nonpriority creditor's name and mailing address STERICYCLE PO BOX 6578 Carol STREAM, IL 60197 Date(s) debt was incurred <u>2/28/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$702.16
3.451	Nonpriority creditor's name and mailing address STERICYCLE PO BOX 6578 Carol STREAM, IL 60197 Date(s) debt was incurred <u>4/1/3017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$702.47
3.452	Nonpriority creditor's name and mailing address STERICYCLE PO BOX 6578 Carol STREAM, IL 60197 Date(s) debt was incurred <u>5/31/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$702.63

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3.453	Nonpriority creditor's name and mailing address STERICYCLE PO BOX 6578 Carol STREAM, IL 60197 Date(s) debt was incurred <u>6/30/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$713.17
3.454	Nonpriority creditor's name and mailing address STERICYCLE PO BOX 6578 Carol STREAM, IL 60197 Date(s) debt was incurred <u>7/31/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$723.87
3.455	Nonpriority creditor's name and mailing address STERICYCLE PO BOX 6578 Carol STREAM, IL 60197 Date(s) debt was incurred <u>8/31/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$734.72
3.456	Nonpriority creditor's name and mailing address STOW-IT PO BOX 669 FERNDAL, WA 00098-4248 Date(s) debt was incurred <u>10/4/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,233.80
3.457	Nonpriority creditor's name and mailing address STREICH BROTHERS, INC. 1650 MARINE VIEW DRIVE TACOMA, WA 98422 Date(s) debt was incurred <u>8/31/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$707.50
3.458	Nonpriority creditor's name and mailing address STUD WELDING PRODUCTS PO BOX 68887 SEATTLE, WA 98168 Date(s) debt was incurred <u>12/16/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$668.43
3.459	Nonpriority creditor's name and mailing address SUMMIT LAW GROUP PLLC 315 FIFTH AVENUE SOUTH SUITE 1000 SEATTLE, WA 98104-2682 Date(s) debt was incurred <u>3/21/2018</u> Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$360.00

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3.460	Nonpriority creditor's name and mailing address SUNBELT RENTALS, INC. PO BOX 409211 ATLANTA, GA 30384 Date(s) debt was incurred <u>9/30/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,874.08
3.461	Nonpriority creditor's name and mailing address TACOMA DIESEL & EQUIPMENT INC. 444 54TH AVE E Fife, WA 98424 Date(s) debt was incurred <u>12/19/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$361.28
3.462	Nonpriority creditor's name and mailing address TACOMA HYDRAULICS, INC 405 PORTER WAY UNIT A MILTON, WA 98354 Date(s) debt was incurred <u>9/11/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,877.50
3.463	Nonpriority creditor's name and mailing address TACOMA RUBBER STAMP PO BOX 1398 Tacoma, WA 98401 Date(s) debt was incurred <u>9/29/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11.95
3.464	Nonpriority creditor's name and mailing address TACOMA SCREW PRODUCTS, INC. 2001 CENTER STREET TACOMA, WA 98409 Date(s) debt was incurred <u>8/10/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,418.45
3.465	Nonpriority creditor's name and mailing address TACOMA STEEL SUPPLY 701 EAST 64TH ST TACOMA, WA 98404 Date(s) debt was incurred <u>8/14/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,032.86
3.466	Nonpriority creditor's name and mailing address TEAM INDUSTRIAL SERVICES 11837 WATER TANK RD. BURLINGTON, WA 98233 Date(s) debt was incurred <u>8/22/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,033.51

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3.467	Nonpriority creditor's name and mailing address TECH-1 AUTOMOTIVE 1460 ILLINOIS STREET SAN FRANCISCO, CA 94107 Date(s) debt was incurred <u>12/6/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$217.50
3.468	Nonpriority creditor's name and mailing address TECH-1 AUTOMOTIVE 1460 ILLINOIS STREET SAN FRANCISCO, CA 94107 Date(s) debt was incurred <u>12/6/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$405.59
3.469	Nonpriority creditor's name and mailing address TECH-1 AUTOMOTIVE 1460 ILLINOIS STREET SAN FRANCISCO, CA 94107 Date(s) debt was incurred <u>12/6/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$226.25
3.470	Nonpriority creditor's name and mailing address TECH-1 AUTOMOTIVE 1460 ILLINOIS STREET SAN FRANCISCO, CA 94107 Date(s) debt was incurred <u>12/6/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$353.32
3.471	Nonpriority creditor's name and mailing address TECH-1 AUTOMOTIVE 1460 ILLINOIS STREET SAN FRANCISCO, CA 94107 Date(s) debt was incurred <u>12/6/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$75.00
3.472	Nonpriority creditor's name and mailing address TECHCOLLECTIVE COOPERATIVE 101 CALIFORNIA ST. SUITE 2710 SAN FRANCISCO, CA 94111 Date(s) debt was incurred <u>6/20/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,170.62
3.473	Nonpriority creditor's name and mailing address THEBUYINGNETWORK.COM 420 SO 96TH STREET, SUITE 3 SEATTLE, WA 98108 Date(s) debt was incurred <u>3/14/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$266.14

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3.474	Nonpriority creditor's name and mailing address THRESHOLD DOCUMENTS 810 N STATE STREET BELLINGHAM, WA 98225 Date(s) debt was incurred <u>6/29/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$918.69
3.475	Nonpriority creditor's name and mailing address TIMCO, INC. 1926 PORT OF TACOMA RD TACOMA, WA 98421 Date(s) debt was incurred <u>7/17/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,856.73
3.476	Nonpriority creditor's name and mailing address TOP TO BOTTOM, INC. 2620 N HARBOR LOOP DR #16 BELLINGHAM, WA 98225 Date(s) debt was incurred <u>10/5/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,800.00
3.477	Nonpriority creditor's name and mailing address TORCH & REGULATOR REPAIR CO. 2526 TACOMA AVE S TACOMA, WA 98402 Date(s) debt was incurred <u>7/17/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,180.28
3.478	Nonpriority creditor's name and mailing address TORK SYSTEMS 3330 EVERGREEN AVE JACKSONVILLE, FL 32206 Date(s) debt was incurred <u>9/22/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,440.55
3.479	Nonpriority creditor's name and mailing address TRADESMEN INTERNATIONAL, LLC 910 SW Spokane Street Seattle, WA 98134 Date(s) debt was incurred <u>5/8/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$43,776.00
3.480	Nonpriority creditor's name and mailing address TRI-COUNTY DIESEL MARINE 2696 ROEDER AVE. BELLINGHAM, WA 98225 Date(s) debt was incurred <u>11/22/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,516.49

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3.481	Nonpriority creditor's name and mailing address TRUTINA FINANCIAL 10811 MAIN ST BELLEVUE, WA 98004 Date(s) debt was incurred <u>6/30/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,000.00
3.482	Nonpriority creditor's name and mailing address ULINE PO BOX 88741 CHICAGO, IL 60680-1741 Date(s) debt was incurred <u>10/4/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$98.59
3.483	Nonpriority creditor's name and mailing address UMPQUA BANK PO BOX 2310 SPOKANE, WA 99210 Date(s) debt was incurred <u>8/1/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$426.98
3.484	Nonpriority creditor's name and mailing address UNIFIRST 1025 N LEVEE ROAD PUYALLUP, WA 98371 Date(s) debt was incurred <u>10/4/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,094.42
3.485	Nonpriority creditor's name and mailing address UNITED RENTALS 123 LOOMIS ST SAN FRANCISCO, CA 94124 Date(s) debt was incurred <u>2/6/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$130,090.48
3.486	Nonpriority creditor's name and mailing address UNITED SITE SERVICES PO BOX 53267 PHOENIX, AZ 85072 Date(s) debt was incurred <u>1/12/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,063.89
3.487	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>1/31/2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$705.94

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3.488	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>7/20/2015</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$524.30
3.489	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>8/13/2015</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,759.38
3.490	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>9/11/2015</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,506.25
3.491	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>9/23/2015</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$271.57
3.492	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>10/7/2015</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,187.19
3.493	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>10/31/2015</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,132.82
3.494	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>11/30/2015</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$409.38

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3.495	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>12/23/2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$301.75
3.496	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>1/25/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,560.63
3.497	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>1/26/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$658.56
3.498	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>2/15/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,132.82
3.499	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>2/15/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$496.13
3.500	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>2/17/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,557.32
3.501	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>2/25/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$232.78

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3.502	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>3/15/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,132.82
3.503	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>3/17/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$883.50
3.504	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>3/17/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,470.32
3.505	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>3/25/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$544.13
3.506	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>4/30/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$489.75
3.507	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>4/30/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,999.38
3.508	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>7/28/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$333.75

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3.509	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>7/31/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,324.13
3.510	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>8/6/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$625.29
3.511	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>8/25/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$333.75
3.512	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>8/26/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,872.79
3.513	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>9/22/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$353.75
3.514	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>10/31/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$704.79
3.515	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>11/18/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$353.75

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3.516	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>11/30/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$278.03
3.517	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>12/16/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$353.75
3.518	Nonpriority creditor's name and mailing address United Site Services of CA Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>12/29/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$223.65
3.519	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>12/31/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,365.00
3.520	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>12/29/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$223.65
3.521	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>11/30/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$278.03
3.522	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>11/30/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3.71

Debtor **Puglia Engineering Inc.**
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3.523	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>11/18/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$353.75
3.524	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>10/31/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$704.79
3.525	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>9/22/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$353.75
3.526	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>8/26/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,872.79
3.527	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>8/25/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$333.75
3.528	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>8/6/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$625.29
3.529	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>7/31/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,324.13

Debtor **Puglia Engineering Inc.**
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3.530	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>7/28/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$333.75
3.531	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>4/30/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,999.38
3.532	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>4/30/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$489.75
3.533	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>3/25/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$544.13
3.534	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>3/17/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,470.32
3.535	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>3/17/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$883.50
3.536	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>2/25/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$232.78

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3.537	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>2/23/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$944.88
3.538	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>2/17/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,557.32
3.539	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>2/15/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$496.13
3.540	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>2/15/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,132.82
3.541	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>1/26/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$658.56
3.542	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>1/25/2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,560.63
3.543	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>12/23/2015</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$301.75

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3.544	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>11/30/2015</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$409.38
3.545	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>10/31/2015</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,132.82
3.546	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>10/7/2015</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,187.19
3.547	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>9/23/2015</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$271.57
3.548	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>9/11/2015</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,506.25
3.549	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>8/13/2015</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,759.38
3.550	Nonpriority creditor's name and mailing address United Site Svc of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>7/20/2015</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$524.30

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3.551	Nonpriority creditor's name and mailing address UNITED WESTERN SUPPLY 5245 E MARGINAL WAY SEATTLE, WA 98134 Date(s) debt was incurred <u>1/5/2018</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$80,636.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.552	Nonpriority creditor's name and mailing address UPS PO BOX 361595 COLUMBUS, OH 43236 Date(s) debt was incurred <u>5/19/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$323.96 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.553	Nonpriority creditor's name and mailing address UPS PO BOX 894820 LOS ANGELES, CA 90189 Date(s) debt was incurred <u>9/23/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$274.79 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.554	Nonpriority creditor's name and mailing address USE W&O SUPPLY PO BOX 933067 ATLANTA, GA 31193-3067 Date(s) debt was incurred <u>12/27/2016</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,065.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.555	Nonpriority creditor's name and mailing address USMCAE 1516 So. Graham St. Seattle, WA 98108 Date(s) debt was incurred <u>7/6/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$7,020.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.556	Nonpriority creditor's name and mailing address Utd Site Services of CA, Inc PO Box 53267 Phoenix, AZ 85072-3267 Date(s) debt was incurred <u>1/31/2015</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$705.94 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.557	Nonpriority creditor's name and mailing address VALLEY OIL COMPANY PO BOX 1655 MOUNTAIN VIEW, CA 94042 Date(s) debt was incurred <u>4/21/2017</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,895.37 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.558	Nonpriority creditor's name and mailing address VALVE AUTOMATION & CONTROLS PO BOX 933067 ATLANTA, GA 98680-0848 Date(s) debt was incurred <u>12/27/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,065.00
3.559	Nonpriority creditor's name and mailing address VANCE LIFT TRUCK SERVICE 10005 LAKEVIEW AVE SW LAKEWOOD, WA 98499 Date(s) debt was incurred <u>10/1/2013</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$84.01
3.560	Nonpriority creditor's name and mailing address VANDERYACHT PROPANE INC. 6811 GUIDE MERIDIAN LYNDEN, WA 98264 Date(s) debt was incurred <u>10/18/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$990.04
3.561	Nonpriority creditor's name and mailing address VERIZON WIRELESS PO BOX 660108 DALLAS, TX 75266-0108 Date(s) debt was incurred <u>9/21/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,281.05
3.562	Nonpriority creditor's name and mailing address VOLT 2401 N. Glassell Street Orange, CA 92865 Date(s) debt was incurred <u>1/29/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,680.00
3.563	Nonpriority creditor's name and mailing address VOLT 2401 N. Glassell Street Los ANGELES, CA 90074 Date(s) debt was incurred <u>2/19/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,680.00
3.564	Nonpriority creditor's name and mailing address VOLT 2401 N. Glassell Street Los ANGELES, CA 90074 Date(s) debt was incurred <u>2/12/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,680.00

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3.565	Nonpriority creditor's name and mailing address VOLT MANAGEMENT CORP PO BOX 679307 DALLAS, TX 75267-9307 Date(s) debt was incurred <u>2/12/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,744.00
3.566	Nonpriority creditor's name and mailing address W&O SUPPLY PO BOX 933067 ATLANTA, GA 31193 Date(s) debt was incurred <u>8/4/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,193.75
3.567	Nonpriority creditor's name and mailing address WA STATE DEPT. OF ECOLOGY PO BOX 47611 OLYMPIA, WA 98504-7611 Date(s) debt was incurred <u>11/9/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,584.00
3.568	Nonpriority creditor's name and mailing address WA TRUCKING ASSOCIATIONS 2102 CARRIAGE DR SW BLD F OLYMPIA, WA 98502 Date(s) debt was incurred <u>9/1/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$330.00
3.569	Nonpriority creditor's name and mailing address WALASHEK INDUSTRIAL AND MARINE 6410 S 143RD ST TUKWILA, WA 98168 Date(s) debt was incurred <u>2/21/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$64,025.00
3.570	Nonpriority creditor's name and mailing address WARTSILA DEFENSE, INC 3617 KOPPENS WAY CHESAPEAKE, VA 23323 Date(s) debt was incurred <u>2/28/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$410,101.73
3.571	Nonpriority creditor's name and mailing address WASHINGTON ALARM 2030 AIRPORT WAY S SEATTLE, WA 98134-1603 Date(s) debt was incurred <u>4/24/2017</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$843.56

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3.572	Nonpriority creditor's name and mailing address WASHINGTON CRANE & HOIST 1334 THORNTON AVE SW PACIFIC, WA 98047 Date(s) debt was incurred <u>10/12/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$139.44
3.573	Nonpriority creditor's name and mailing address Washington State Dept of Revenue Taxpayer Account Admin Division RE: #601-323-390 PO Box 47476 Olympia, WA 98504-7476 Date(s) debt was incurred <u>11/15/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$190,000.00
3.574	Nonpriority creditor's name and mailing address WASHINGTON STATE FERRIES LEGAL SERVICES & CONTRACTS DEP 2901 THIRD AVE, SUITE 500 SEATTLE, WA 98121-3014 Date(s) debt was incurred <u>3/15/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$250.00
3.575	Nonpriority creditor's name and mailing address WATER WEIGHTS 470 SATELLITE BLVD STE K PO BOX 2286 SUWANEE, GA 30024 Date(s) debt was incurred <u>7/19/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,867.00
3.576	Nonpriority creditor's name and mailing address WCR INCORPORATED 2377 COMMERCE CENTER BLVD. SUITE B FAIRBURN, OH 95324 Date(s) debt was incurred <u>4/10/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,574.00
3.577	Nonpriority creditor's name and mailing address WEST COAST MARINE CHEMISTS INC PO BOX 2562 ALAMEDA, CA 94501 Date(s) debt was incurred <u>1/31/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,542.59
3.578	Nonpriority creditor's name and mailing address WEST COAST WIRE ROPE & RIGGING 2900 NW 29TH AVE PORTLAND, OR 97210 Date(s) debt was incurred <u>12/21/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,950.37

Debtor **Puglia Engineering Inc.**
Name

Case number (if known) **18-41324**

3.579	Nonpriority creditor's name and mailing address West Conf. of Teamsters Pen. Teamsters Local #2785 1000 Marina Blvd Suite 400 Brisbane, CA 94005-1841 Date(s) debt was incurred <u>5/28/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,589.00
3.580	Nonpriority creditor's name and mailing address WEST MARINE PRO PO BOX 50060 Watsonville, CA 95077 Date(s) debt was incurred <u>12/21/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$89.75
3.581	Nonpriority creditor's name and mailing address WEST MARINE PRO PO BOX 50060 Watsonville, CA 95077 Date(s) debt was incurred <u>12/29/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,245.12
3.582	Nonpriority creditor's name and mailing address WESTAR MARINE SERVICES PO BOX 78100 SAN FRANCISCO, CA 94107-9991 Date(s) debt was incurred <u>3/2/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,225.00
3.583	Nonpriority creditor's name and mailing address Western Conf of Teamsters Pens Teamsters Local #2785 1000 Marina Blvd Suite 400 Brisbane, CA 94005-1841 Date(s) debt was incurred <u>5/28/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,589.00
3.584	Nonpriority creditor's name and mailing address WESTERN PACIFIC CRANE 19602 60TH AVE NE ARLINGTON, WA 98223 Date(s) debt was incurred <u>7/13/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,914.04
3.585	Nonpriority creditor's name and mailing address WESTERN TOW BOAT 617 NW 40TH STREET SEATTLE, WA 98107 Date(s) debt was incurred <u>11/29/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$23,560.00

Debtor **Puglia Engineering Inc.**
Name

Case number (if known) **18-41324**

3.586	Nonpriority creditor's name and mailing address WHATCOM COUNTY TREASURER PO BOX 34873 SEATTLE, WA 98124 Date(s) debt was incurred <u>2/28/2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$40,782.06
3.587	Nonpriority creditor's name and mailing address WHATCOM OCCUPATIONAL HEALTH 3010 SQUALICUM PARKWAY Bellingham, WA 98225 Date(s) debt was incurred <u>9/5/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$185.00
3.588	Nonpriority creditor's name and mailing address WHISTLE WORKWEAR, LLC 3908 MERIDIAN ST #101 BELLINGHAM, WA 98226 Date(s) debt was incurred <u>1/17/2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,693.90
3.589	Nonpriority creditor's name and mailing address WILCOX & FLEGEL 95 PANEL WAY PO BOX 69 LONGVIEW, WA 98632 Date(s) debt was incurred <u>7/31/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$38.22
3.590	Nonpriority creditor's name and mailing address WILLIAMS OIL FILTER SERVICE 1247 PUYALLUP AVE TACOMA, WA 98421 Date(s) debt was incurred <u>8/29/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$554.13
3.591	Nonpriority creditor's name and mailing address WILSON WALTON INT'L INC. 3349 ROUTE 138 BLDG C, SUITE E WALL, NJ 07719 Date(s) debt was incurred <u>11/17/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,600.00
3.592	Nonpriority creditor's name and mailing address WILSON WALTON INT'L, INC 3349 ROUTE 138, BLDG C, STE E E WALL, NJ 07719 Date(s) debt was incurred <u>11/29/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,567.15

Debtor **Puglia Engineering Inc.**
Name

Case number (if known) **18-41324**

3.593	Nonpriority creditor's name and mailing address WILSON WALTON INT'L, INC 3349 ROUTE 138, BLDG C E WALL, NJ 07719 Date(s) debt was incurred <u>11/19/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,670.00
3.594	Nonpriority creditor's name and mailing address WOOD'S LOGGING SUPPLY PO BOX K LONGVIEW, WA 98632 Date(s) debt was incurred <u>10/5/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,200.56
3.595	Nonpriority creditor's name and mailing address World Enviro & Energy, Inc PO Box 256 West Sacramento, CA 95691 Date(s) debt was incurred <u>8/25/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$391.68
3.596	Nonpriority creditor's name and mailing address WORLDWIDE DIESEL POWER INC. 732 PARKER ST JACKSONVILLE, FL 32202 Date(s) debt was incurred <u>8/24/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$61,382.50
3.597	Nonpriority creditor's name and mailing address WRIGHT MACHINE 719 S MONROE ST SEATTLE, WA 98108 Date(s) debt was incurred <u>5/31/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,064.00
3.598	Nonpriority creditor's name and mailing address XPOLOGISTICS PO BOX 5160 PORTLAND, OR 97208 Date(s) debt was incurred <u>4/29/2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$365.30
3.599	Nonpriority creditor's name and mailing address XPOLOGISTICS PO BOX 5160 PORTLAND, OR 97208 Date(s) debt was incurred <u>6/24/2017</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$956.67

Debtor **Puglia Engineering Inc.**
Name

Case number (if known) **18-41324**

3.600 Nonpriority creditor's name and mailing address
XPOLOGISTICS
PO BOX 5160
PORTLAND, OR 97208
Date(s) debt was incurred 12/21/2016
Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

\$151.33

☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

Is the claim subject to offset? ☒ No ☐ Yes

3.601 Nonpriority creditor's name and mailing address
XPOLOGISTICS
PO BOX 5160
PORTLAND, OR 97208
Date(s) debt was incurred 10/11/2016
Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

\$119.70

☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

Is the claim subject to offset? ☒ No ☐ Yes

3.602 Nonpriority creditor's name and mailing address
ZORO TOOLS
909 ASBURY DRIVE
BUFFALO GROVE, IL 60089
Date(s) debt was incurred 8/4/2017
Last 4 digits of account number

As of the petition filing date, the claim is: Check all that apply.

\$406.53

☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

Is the claim subject to offset? ☒ No ☐ Yes

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the
related creditor (if any) listed?

Last 4 digits of
account number, if
any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 0.00
5b. +	\$ 11,722,903.96
5c.	\$ 11,722,903.96

Fill in this information to identify the case:

Debtor name **Puglia Engineering Inc.**

United States Bankruptcy Court for the: **WESTERN DISTRICT OF WASHINGTON**

Case number (if known) **18-41324**

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).

Property

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest **Job**

State the term remaining

List the contract number of any government contract

**ACGI
16400 Southcenter Parkway
Suite 400
Seattle, WA 98188**

2.2. State what the contract or lease is for and the nature of the debtor's interest **Job**

State the term remaining

List the contract number of any government contract

**Alaska Marine Lines
18000 International BLVD
Suite 900
Seattle, WA 98188**

2.3. State what the contract or lease is for and the nature of the debtor's interest **Job**

State the term remaining

List the contract number of any government contract

**Bennett Industries
1160 Thorne Rd
Tacoma, WA 98421**

2.4. State what the contract or lease is for and the nature of the debtor's interest **Job**

State the term remaining

List the contract number of any government contract

**Boyer Towing Inc
7318 4th Ave S
Seattle, WA 98108**

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.5. State what the contract or lease is for and the nature of the debtor's interest **Job**

State the term remaining

List the contract number of any government contract _____

**CargoTech: MacGregor Division
3300 Elmhuts Lane
Portsmouth, VA 23701**

2.6. State what the contract or lease is for and the nature of the debtor's interest **Lease**

State the term remaining

List the contract number of any government contract _____

**Catrina Stenvers
2267 Rusty Lane
Bellingham, WA 98225**

2.7. State what the contract or lease is for and the nature of the debtor's interest **Job**

State the term remaining

List the contract number of any government contract _____

**DecoMack Marine Inc.
2727 Mountain View Road
Ferndale, WA 98248-9666**

2.8. State what the contract or lease is for and the nature of the debtor's interest **Job**

State the term remaining

List the contract number of any government contract _____

**Dunlap Towing
PO box 593
Laconner, WA 98257**

2.9. State what the contract or lease is for and the nature of the debtor's interest **Job**

State the term remaining

List the contract number of any government contract _____

**Electric Motor Services
1928 Milwaukee Way
Tacoma, WA 98421**

2.10. State what the contract or lease is for and the nature of the debtor's interest **Job**

State the term remaining

List the contract number of any government contract _____

**IMCO
2116 Buchanan Loop
Ferndale, WA 98248**

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

government contract

2.11. State what the contract or lease is for and the nature of the debtor's interest **Job**

State the term remaining

List the contract number of any government contract

**Kirby Offshore Marine
2700 W. Commodore Way
Seattle, WA 98199**

2.12. State what the contract or lease is for and the nature of the debtor's interest **Job**

State the term remaining

List the contract number of any government contract

**Laznak Inc. LLC
PO Box 1631
Petersburg, AK 99833**

2.13. State what the contract or lease is for and the nature of the debtor's interest **Job**

State the term remaining

List the contract number of any government contract

**Lummi Sewer
2156 Lummi View Dr.
Bellingham, WA 98226**

2.14. State what the contract or lease is for and the nature of the debtor's interest **Job**

State the term remaining

List the contract number of any government contract

**Matson Navigation
426 N 44th Street
Suite 250
Phoenix, AZ 85008**

2.15. State what the contract or lease is for and the nature of the debtor's interest **Job**

State the term remaining

List the contract number of any government contract

**MD Marine
672 E. 11th Street
Tacoma, WA 98421**

2.16. State what the contract or lease is for and the nature of the debtor's interest **Lease**

**Neil Turney
2216 East 11th Street
Tacoma, WA 98421**

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

State the term remaining

List the contract number of any government contract _____

2.17. State what the contract or lease is for and the nature of the debtor's interest **Job**

State the term remaining

List the contract number of any government contract _____

**NOAA
Western Acquisition Division
7600 Sand Point Way NE
SOU6
Seattle, WA 98115**

2.18. State what the contract or lease is for and the nature of the debtor's interest **Job**

State the term remaining

List the contract number of any government contract _____

**NRC Environmental Services
3500 Sunrise Hwy
Ste 200 Bldg 200
Great River, NY 11739**

2.19. State what the contract or lease is for and the nature of the debtor's interest **Job**

State the term remaining

List the contract number of any government contract _____

**Pacific Pile and Marine
700 S Riverside Dr.
Seattle, WA 98108**

2.20. State what the contract or lease is for and the nature of the debtor's interest **Job**

State the term remaining

List the contract number of any government contract _____

**Performance Radiator
2667 S Tacoma Way
Tacoma, WA 98409**

2.21. State what the contract or lease is for and the nature of the debtor's interest **Job**

State the term remaining

List the contract number of any government contract _____

**Pierce County Drainage Dist #23
308 West Stewart Avenue
PO Box 1057
Puyallup, WA 98371**

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.22. State what the contract or lease is for and the nature of the debtor's interest **Lease**

State the term remaining

List the contract number of any government contract _____

**Port of Bellingham
1801 Roeder Avenue
PO Box 1677
Bellingham, WA 98277**

2.23. State what the contract or lease is for and the nature of the debtor's interest **Job**

State the term remaining

List the contract number of any government contract _____

**Premier Pacific Seafoods
333 First Avenue West
Seattle, WA 98119**

2.24. State what the contract or lease is for and the nature of the debtor's interest **Job**

State the term remaining

List the contract number of any government contract _____

**Puyallup Tribe of Indians
3009 E Portland Ave
Tacoma, WA 98404**

2.25. State what the contract or lease is for and the nature of the debtor's interest **Job**

State the term remaining

List the contract number of any government contract _____

**Robby Bruce
PO Box 104
Elk, CA 95432**

2.26. State what the contract or lease is for and the nature of the debtor's interest **Job**

State the term remaining

List the contract number of any government contract _____

**Samson Tug & Barge
329 Harbor Drive
PO Box 559
Sitka, AK 99835**

2.27. State what the contract or lease is for and the nature of the debtor's interest **Job**

State the term remaining

List the contract number of any government contract _____

**Schnitzer Steel Industries
PO Box 10636
Portland, OR 97295**

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

government contract

2.28. State what the contract or lease is for and the nature of the debtor's interest

Job

State the term remaining

List the contract number of any government contract

**Scrap It - Parberry
1526 Slater Road
Ferndale, WA 98248**

2.29. State what the contract or lease is for and the nature of the debtor's interest

Job

State the term remaining

List the contract number of any government contract

**Tacoma School District
Purchasing Dept
PO Box 1357
Tacoma, WA 98401**

2.30. State what the contract or lease is for and the nature of the debtor's interest

Job

State the term remaining

List the contract number of any government contract

**Ted Morehouse
1513 Bass Lake Road
Holly Springs, NC 27540**

2.31. State what the contract or lease is for and the nature of the debtor's interest

Job

State the term remaining

List the contract number of any government contract

**TEMCO
11 Schuster Parkway
Tacoma, WA 98402**

2.32. State what the contract or lease is for and the nature of the debtor's interest

Job

State the term remaining

List the contract number of any government contract

**US Coast Guard
300 E. Main St
Norfolk, VA 23510**

2.33. State what the contract or lease is for and the nature of the debtor's interest

Job**WA State Dept of Transportation
2901 3rd Ave
Suite 500
Seattle, WA 98121**

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

State the term remaining

List the contract number of any government contract

2.34.	State what the contract or lease is for and the nature of the debtor's interest	Job
	State the term remaining	
	List the contract number of any government contract	Western Machine 652 E. 11th Street Tacoma, WA 98421

Fill in this information to identify the case:Debtor name **Puglia Engineering Inc.**United States Bankruptcy Court for the: **WESTERN DISTRICT OF WASHINGTON**Case number (if known) **18-41324**☒ Check if this is an amended filing**Official Form 206H
Schedule H: Your Codebtors****12/15**

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

*Column 1: Codebtor**Column 2: Creditor***Name****Mailing Address****Name***Check all schedules that apply:*2.1 **Neil Turney****2216 East 11th Street
Tacoma, WA 98421****Washington Federal**☒ D **2.3**☐ E/F _____☐ G _____

Fill in this information to identify the case:Debtor name **Puglia Engineering Inc.**United States Bankruptcy Court for the: **WESTERN DISTRICT OF WASHINGTON**Case number (if known) **18-41324**☒ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****04/16**

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income**1. Gross revenue from business**☐ None.**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year****From the beginning of the fiscal year to filing date:**
From **1/01/2018** to **Filing Date****Sources of revenue**
Check all that apply☒ Operating a business
☐ Other _____**Gross revenue**
(before deductions and exclusions)**\$2,221,388.79****For prior year:**
From **1/01/2017** to **12/31/2017**☒ Operating a business
☐ Other _____**\$33,789,859.00****For year before that:**
From **1/01/2016** to **12/31/2016**☒ Operating a business
☐ Other _____**\$33,967,094.00****2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☐ None.**Description of sources of revenue****Gross revenue from each source**
(before deductions and exclusions)**For prior year:**
From **1/01/2017** to **12/31/2017****Rebates, Refunds and San Francisco Shipyard A/R****\$3,831,501.00****For year before that:**
From **1/01/2016** to **12/31/2016****Rebates, Refunds and Interest****\$35,400.00****For the fiscal year:**
From **1/01/2015** to **12/31/2015****Rebates, Refunds and Interest****\$88,983.00****Part 2: List Certain Transfers Made Before Filing for Bankruptcy**

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. See Attached		\$2,153,791.30	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. Neil Turney P.O. Box 1302 Tacoma, WA 98401	05/05/17	\$480.00	Payroll
4.2. Neil Turney P.O. Box 1302 Tacoma, WA 98401	05/07/17	\$20,000.00	Short Term loan
4.3. Neil Turney P.O. Box 1302 Tacoma, WA 98401	05/03/17	\$16,000.00	Rent
4.4. Neil Turney P.O. Box 1302 Tacoma, WA 98401	05/25/17	\$16,000.00	Rent
4.5. Neil Turney P.O. Box 1302 Tacoma, WA 98401	09/11/17	\$48,000.00	Rent
4.6. Neil Turney P.O. Box 1302 Tacoma, WA 98401	09/29/17	\$16,000.00	Rent
4.7. Neil Turney P.O. Box 1302 Tacoma, WA 98401	10/26/17	\$16,000.00	Rent
4.8. Neil Turney P.O. Box 1302 Tacoma, WA 98401		\$8,000.00	Employee Compensation
4.9. Neil Turney P.O. Box 1302 Tacoma, WA 98401		\$16,000.00	Rent

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1.	Reliance Metal Center v. Puglia Engineering, Inc. 7Z79978C	Collection	Pierce County District Court 930 Tacoma Ave Rm 239 Tacoma, WA 98402	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2.	Judice v. BAE Systems San Francisco CGC16555608	Employee Claim	San Francisco County Superior Court 400 McAllister Street San Francisco, CA 94102	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.3.	Antoine v. BAE Systems et al. 17CV02231SBA	Employee Claim	US District Court - ND Cal. 450 Golden Gate Ave. Box 36060 San Francisco, CA 94102	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.4.	Joe Robinson v. Puglia Engineering, Inc. 17-2-01542-0	Personal Injury	Whatcom County Superior Court 311 Grand Ave, Suite 301 Bellingham, WA 98225	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.5.	Motor-Services Hugo Stamp, Inc. v. Puglia Engineering, Inc. 17-cv-61711	Collection	US District Court - SD Fla 400 N. Miami Ave, Rm 11-1 Miami, FL 33128	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.6.	Puglia Engineering, Inc. v. BAE Systems Ship Repair Inc. et al. CGC-17-557087	Fraud and Violation of CA Securities Laws	California Superior Court 400 McAllister Street San Francisco, CA 94102	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.7.	BAE Systems Ship Repair Inc. v. Puglia Engineering, Inc. 17CV1287	Breach of Contract	US District Court SDNY 500 Pearl Street New York, NY 10007	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.8.	N/A	Audit	State of WA Dept of Revenue PO Box 47464 Olympia, WA 98504	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.9.	Tradesmen International, LLC v. Puglia Engineering, Inc.	Collection	Murphy, Pearson, Bradley & Feeney 88 Kearny Street, 10th Floor San Francisco, CA 94108	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.10	Holt of CA v. Puglia Engineering STK-CV-LBC-2017-0010612	Collection	Superior Court of CA County of San Joaquin 180 E. Weber Ave. Stockton, CA 95202	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.11	North Coast Electric Co. v. Puglia Engineering, Inc. 18-2-06767-75GA	Collection	King County Superior Court 516 Third Avenue, Room E-609 Seattle, WA 98104	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Part 4: Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

☐ None

	Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1.	DES Surplus Operation 7511 New Market Street SW Olympia, WA 98501		1/25/17	\$6,362.12
	Recipients relationship to debtor			
9.2.	Christian Faith School 33645 20th Ave S Federal Way, WA 98003		5/31/17; 9/14/17	\$30,000.00
	Recipients relationship to debtor			
9.3.	Billy Graham Evangelist 1 Billy Graham Parkway Charlotte, NC 28201		6/27/16	\$2,500.00
	Recipients relationship to debtor			

Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss <small>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).</small>	Dates of loss	Value of property lost

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Bush Kornfeld LLP 601 Union St., #5000 Seattle, WA 98101-2373		04/21/17	\$5,095.00
	Email or website address www.bsksd.com			
	Who made the payment, if not debtor?			
11.2.	Bush Kornfeld LLP 601 Union St., #5000 Seattle, WA 98101-2373		08/14/17	\$2,754.00
	Email or website address			
	Who made the payment, if not debtor?			
11.3.	Bush Kornfeld LLP 601 Union St., #5000 Seattle, WA 98101-2373		09/22/17	\$2,258.38
	Email or website address			
	Who made the payment, if not debtor?			

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.4.	Bush Kornfeld LLP 601 Union St., #5000 Seattle, WA 98101-2373		11/30/17	\$9,892.62
	Email or website address			
	Who made the payment, if not debtor?			
11.5.	Bush Kornfeld LLP 601 Union St., #5000 Seattle, WA 98101-2373		01/16/18	\$2,000.00
	Email or website address			
	Who made the payment, if not debtor?			
11.6.	Bush Kornfeld LLP 601 Union St., #5000 Seattle, WA 98101-2373		01/19/18	\$20,451.77
	Email or website address			
	Who made the payment, if not debtor?			
11.7.	Bush Kornfeld LLP 601 Union St., #5000 Seattle, WA 98101-2373		02/15/18	\$9,892.62
	Email or website address			
	Who made the payment, if not debtor?			
11.8.	Bush Kornfeld LLP 601 Union St., #5000 Seattle, WA 98101-2373		03/15/18	\$35,304.40
	Email or website address			
	Who made the payment, if not debtor?			

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.9.	Bush Kornfeld LLP 601 Union St., #5000 Seattle, WA 98101-2373		04/12/17	\$38,104.69
	Email or website address			
	Who made the payment, if not debtor?			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address	Dates of occupancy From-To
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Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
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Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.
- ☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?☐ No. Go to Part 10.☒ Yes. Does the debtor serve as plan administrator?☒ No Go to Part 10.☐ Yes. Fill in below:**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
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19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
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20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
City Storage of San Francisco 500 Indiana Street San Francisco, CA 94107	Scott Hendrickson 201 Harris Ave Bellingam, WA 98225	Employee files for San Francisco site	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None

Owner's name and address	Location of the property	Describe the property	Value
Various		The Debtor stores its customer's property from the vessels it is working on for the duration of the work.	Unknown

Owner's name and address	Location of the property	Describe the property	Value
Customer vessels and their contents			\$0.00

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☐ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1. BAE Systems San Francisco Shipyard 70 Pier San Francisco, CA 94107	Shipyard Repair	Dates business existed EIN: 94-3168698 From-To 12/03/92 - Present

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☐ None

Name and address		Date of service From-To
26a.1.	Victor ("Scott") Hendrickson 201 Harris Ave Bellingham, WA 98225	05/05/13-Present (CFO)
26a.2.	Maggie Proctor 201 Harris Ave Bellingham, WA 98225	07/30/07-Present (Accounts Payable)
26a.3.	Jeanetter Rhodes 201 Harris Ave Bellingham, WA 98225	03/24/14-Present (Employee - Accountant)
26a.4.	Michelle Mellema 201 Harris Ave Bellingham, WA 98225	05/11/15-Present (Employee - Payroll)
26a.5.	Rachel Vandermay 201 Harris Ave Bellingham, WA 98225	12/02/13-09/30/17 (Employee - Data Entry)
26a.6.	Joel Underwood 201 Harris Ave Bellingham, WA 98225	06/30/10-Present (Employee - Purchasing)
26a.7.	Valerie Isaak 201 Harris Ave Bellingham, WA 98225	02/01/13-Present (Employee - Purchasing)
26a.8.	Lori Jo Crooks 201 Harris Ave Bellingham, WA 98225	11/17/14-Present (Employee - Tool Inventory)
26a.9.	Larson Gross PLLC 2211 Rimland Dr Bellingham, WA 98226	12/31/13 - Present
26a.10.	VL Scott PLLC 1204 Cleveland Ave Mount Vernon, WA 98273	13/31/13 - Present

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address		If any books of account and records are unavailable, explain why
26c.1.	Victor (Scott) Hendrickson 201 Harris Avenue Bellingham, WA 98225	

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address

Name and address

- 26d.1. **Washington Federal**
400 10th Ave NE #104
Bellevue, WA 98004
-
- 26d.2. **Grow America Funds**
708 Third Ave, Suite 710
New York, NY 10017
-
- 26d.3. **First National Commerce Capital**
1029 Hwy 6 N, Suite 650-283
Houston, TX 77079
-
- 26d.4. **EH National Bank**
8484 Wilshire Blvd #100
Beverly Hills, CA 90211
-
- 26d.5. **HUB International NW**
PO Box 3018
Bothell, WA 98011
-
- 26d.6. **State of WA DOT**
2901 Third Ave, Suite 500
Seattle, WA 98121
-
- 26d.7. **William F. Malaier**
901 Fifth Ave, Suite 3500
Seattle, WA 98164
-
- 26d.8. **V.L. Scott PLLC**
1204 Cleveland Ave
Mount Vernon, WA 98273
-
- 26d.9. **Umpqua Bank**
PO Box 2224
Spokane, WA 99210
-
- 26d.10. **Business Ferrett**
710 West Etruria Street
Seattle, WA 98119
-
- 26d.11. **Kiel Mortgage**
604 Oakesdale Ave SW, Suite B-103
Renton, WA 98057
-
- 26d.12. **Bank of the Northwest**
1250 Pacific Ave #100
Tacoma, WA 98402
-
- 26d.13. **Kidder Mathews**
601 Union Street, Suite 4720
Seattle, WA 98101
-
- 26d.14. **Zions Bank**
313 Preist Point Dr NW
Marysville, WA 98271
-
- 26d.15. **Balboa Capital**
2010 Main Street, Suite 1100
Irvine, CA 92614
-
- 26d.16. **Advance Capital**
600 University Street, Suite 1616
Seattle, WA 98101
-

Name and address

26d.17. **Wells Fargo**
205 108th Ave NE, Suite 200
Bellevue, WA 98004

26d.18. **National Commercial Capital**
165 Passaic Ave, Suite 303
Fairfield, NJ 07004

26d.19. **Prudential**
Four Embarcadero Center, Suite 2700
San Francisco, CA 94111

26d.20. **Port of San Francisco**
Pier 1, Teh Embarcadero
San Francisco, CA 94111

26d.21. **BAE Systems**
1101 Wilson Boulevard, Suite 2000
Arlington, VA 22209

26d.22. **Summit Funding Group**
2801 Network Boulevard, Suite 505
Frisco, TX 75034

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

- ☒ No
☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory

Date of inventory

The dollar amount and basis (cost, market, or other basis) of each inventory

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Neil Turney	2216 East 11th Street Tacoma, WA 98421	President	100%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☒ No
☐ Yes. Identify below.

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No
☒ Yes. Identify below.

Debtor **Puglia Engineering Inc.**

Case number (if known) **18-41324**

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1	See Number 4			
	Relationship to debtor			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☐ No
☒ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
Western Metal Industry Pension Plan (Bellingham Machinists; Tacoma Machinists)	EIN:
Boilermaker-Blacksmith National Pension Trust (Tacoma Boilermakers; San Francisco Boilermakers)	EIN:
Marine Carpenters Pension Fund (San Francisco Carpenters)	EIN:
IBEW Pacific Coast Pension Fund (San Francisco Electricians)	EIN:
Pacific Coast Shipyards Pension Fund (San Francisco Laborers, Painters, Pipefitters, Sheet Metal Workers)	EIN:
I.A.M. National Pension Fund (San Francisco Machinists)	EIN:
Operating Engineers Trust Fund for California (San Francisco Operators)	EIN:
Western Conference of Teamsters Pension Fund (San Francisco Teamsters)	EIN:

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **April 17, 2018**

/s/ Neil Turney

Signature of individual signing on behalf of the debtor

Neil Turney

Printed name

Position or relationship to debtor **President**

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☐ No

☒ Yes

In re Puglia Engineering, Inc.

Attachment to Statement of Financial Affairs

Question No. 3

Checking Acct	Account Number	Check Number	Check Date	A/P Amount	Vendor Type	Payee	Address 1	Address 2	Address 3
CHECKING	3557	15725	03/12/18	31,304.58	Other	American Longshore Mutual	PO Box 934368	Atlanta, GA 31193-4368	
CHECKING	3557	15724	02/09/18	39,837.94	Other	American Longshore Mutual	PO Box 934368	Atlanta, GA 31193-4368	
CHECKING	3557	15604	01/15/18	54,899.52	Other	American Longshore Mutual	PO Box 934368	Atlanta, GA 31193-4368	
CHECKING	3557	419684	03/08/18	20,000.00	Subcontractor	AMERICAN SCAFFOLD	PO BOX 13835	SAN DIEGO, CA 92710	
CHECKING	3557	419612	02/08/18	20,000.00	Supplier	BLAST ONE INTERNATIONAL	PO BOX 933052	CLEVELAND, OH 44193	
CHECKING	3557	419685	03/08/18	20,000.00	Supplier	BLAST ONE INTERNATIONAL	4510 BRIDGEWAY AVE	ATTN: KIM AVERY	CLEVELAND, OH 43219
CHECKING	3557	419575	02/02/18	25,000.00	Supplier	BLAST ONE INTERNATIONAL	PO BOX 933052	CLEVELAND, OH 44193	
CHECKING	3557	15666	02/15/18	10,323.23	Supplier	BOILERMAKER NATIONAL PENSION	754 MINNESOTA AVE	SUITE 424	
CHECKING	3557	15729	03/15/18	11,974.43	Supplier	BOILERMAKER NATIONAL PENSION	754 MINNESOTA AVE	SUITE 424	KANSAS CITY, KS 66101
CHECKING	3557	15603	01/15/18	15,592.88	Supplier	BOILERMAKER NATIONAL PENSION	754 MINNESOTA AVE	SUITE 424	KANSAS CITY, KS 66101
CHECKING	3557	419429	01/10/18	20,000.00	Other	BUSH KORNFELD LLP	601 UNION ST., SUITE 5000	SEATTLE, WA 98101	
CHECKING	3557	419502	01/12/18	30,344.39	Other	BUSH KORNFELD LLP	601 UNION ST., SUITE 5000	SEATTLE, WA 98101	
CHECKING	3557	419558	01/26/18	7,878.35	Supplier	CESCO, INC.	7251 CROSS COUNTY ROAD	NORTH CHARLESTON, SC 29418	
CHECKING	3557	419461	01/21/18	7,878.36	Supplier	CESCO, INC.	7251 CROSS COUNTY ROAD	NORTH CHARLESTON, SC 29418	
CHECKING	3557	419580	02/02/18	8,821.53	Supplier	CITY OF BELLINGHAM	FINANCE DEPARTMENT	210 LOTTIE STREET	BELLINGHAM, WA 98225
CHECKING	3557	15687	02/27/18	19,559.74	Supplier	DEPARTMENT OF REVENUE	EXCISE TAX		
CHECKING	3557	15626	01/26/18	40,261.66	Supplier	DEPARTMENT OF REVENUE	EXCISE TAX		
CHECKING	3557	419622	02/08/18	11,369.40	Supplier	FERGUSON ENTERPRISES INC.#3007	PO BOX 847411	DALLAS, TX 75284-7411	
CHECKING	3557	15747	03/25/18	30,985.97	Other	FIRST INSURANCE FUNDING CORP	PO BOX 7000	CAROL STREAM, IL 60197	
CHECKING	3557	15627	01/25/18	30,986.00	Other	FIRST INSURANCE FUNDING CORP	PO BOX 7000	CAROL STREAM, IL 60197	
CHECKING	3557	15701	02/26/18	30,986.00	Other	FIRST INSURANCE FUNDING CORP	PO BOX 7000	CAROL STREAM, IL 60197	
CHECKING	3557	419623	02/08/18	12,197.36	Supplier	HARDWARE SALES	2034 JAMES ST	BELLINGHAM, WA 98225	
CHECKING	3557	419624	02/08/18	7,995.40	Supplier	HERC RENTALS INC.	PO BOX 650280	DALLAS, TX 75265-0280	
CHECKING	3557	419520	01/12/18	9,350.32	Supplier	HERC RENTALS INC.	PO BOX 650280	DALLAS, TX 75265-0280	
CHECKING	3557	419565	01/28/18	12,357.97	Supplier	HERC RENTALS INC.	PO BOX 650280	DALLAS, TX 75265-0280	
CHECKING	3557	419733	03/16/18	6,900.00	Subcontractor	LARSON GROSS PLLC	2211 RIMLAND DR., STE. 422	BELLINGHAM, WA 98226	
CHECKING	3557	418828	02/09/18	10,893.71	Other	MACHINISTS H&W TRUST FUND	PO BOX 34085	SEATTLE, WA 98124-1085	
CHECKING	3557	418777	01/12/18	11,098.17	Other	MACHINISTS H&W TRUST FUND	PO BOX 34085	SEATTLE, WA 98124-1085	
CHECKING	3557	418870	03/07/18	13,466.16	Other	MACHINISTS H&W TRUST FUND	PO BOX 34085	SEATTLE, WA 98124-1085	
CHECKING	3557	418867	03/07/18	41,143.76	Other	MACHINISTS H&W TRUST FUND	PO BOX 34085	SEATTLE, WA 98124-1085	
CHECKING	3557	418775	01/12/18	89,634.62	Other	MACHINISTS H&W TRUST FUND	PO BOX 34085	SEATTLE, WA 98124-1085	
CHECKING	3557	418827	02/09/18	89,634.62	Other	MACHINISTS H&W TRUST FUND	PO BOX 34085	SEATTLE, WA 98124-1085	
CHECKING	3557	419529	01/12/18	18,000.00	Other	NEIL TURNEY	PO BOX 1302	TACOMA, WA 98401	
CHECKING	3557	419593	02/02/18	18,000.00	Other	NEIL TURNEY	PO BOX 1302	TACOMA, WA 98401	
CHECKING	3557	419703	03/08/18	18,000.00	Other	NEIL TURNEY	PO BOX 1302	TACOMA, WA 98401	
CHECKING	3557	15655	02/09/18	9,652.46	Other	NORTHWEST METAL CRAFTS TRUST F	PO BOX 84541	SEATTLE, WA 98124-5841	
CHECKING	3557	15722	03/12/18	10,125.99	Other	NORTHWEST METAL CRAFTS TRUST F	PO BOX 84541	SEATTLE, WA 98124-5841	
CHECKING	3557	15605	01/15/18	10,568.78	Other	NORTHWEST METAL CRAFTS TRUST F	PO BOX 84541	SEATTLE, WA 98124-5841	
CHECKING	3557	15723	03/12/18	24,470.85	Other	NORTHWEST METAL CRAFTS TRUST F	PO BOX 84541	SEATTLE, WA 98124-5841	
CHECKING	3557	15606	01/15/18	26,598.75	Other	NORTHWEST METAL CRAFTS TRUST F	PO BOX 84541	SEATTLE, WA 98124-5841	
CHECKING	3557	15656	02/09/18	26,598.75	Other	NORTHWEST METAL CRAFTS TRUST F	PO BOX 84541	SEATTLE, WA 98124-5841	

CHECKING	3557	419707	03/08/18	12,387.70 Subcontractor	PACIFIC SECURITY	2009 IRON STREET	BELLINGHAM, WA 98225	0
CHECKING	3557	419533	01/12/18	24,944.40 Subcontractor	PACIFIC SECURITY	2009 IRON STREET	BELLINGHAM, WA 98225	0
CHECKING	3557	419725	03/13/18	10,077.14 Supplier	PACIFIC WELDING SUPPLIES LLC	PO BOX 111240	TACOMA, WA 98411	0
CHECKING	3557	15662	02/12/18	13,739.09 Other	Pentagra Retirement Services	108 Corporate Park Drive	White Plains, NY 10604	0
CHECKING	3557	419633	02/08/18	32,905.18 Supplier	PORT OF BELLINGHAM	1801 ROEDER AVE	BELLINGHAM, WA 98227	0
CHECKING	3557	419474	01/26/18	67,501.81 Supplier	PORT OF BELLINGHAM	1801 ROEDER AVE	BELLINGHAM, WA 98227	0
CHECKING	3557	419731	03/15/18	99,626.53 Supplier	PORT OF BELLINGHAM	1801 ROEDER AVE	BELLINGHAM, WA 98227	0
CHECKING	3557	419727	03/14/18	7,697.80 Supplier	PRAXAIR DISTRIBUTION INC.	PO BOX 120812	DEPT 0812	0
CHECKING	3557	419535	01/12/18	28,505.11 Other	PUGET SOUND ENERGY	BOT-01H	PO BOX 91269	0
CHECKING	3557	419599	02/02/18	60,075.14 Other	PUGET SOUND ENERGY	BOT-01H	PO BOX 91269	0
CHECKING	3557	419641	02/12/18	6,528.60 Supplier	SHAMOSH EQUIPMENT CORP	449 ETON ST	ENGLEWOOD, NJ 07631	0
CHECKING	3557	419653	02/14/18	16,977.33 Supplier	SHERWIN WILLIAMS-BELLINGHAM	1401 N STATE ST	BELLINGHAM, WA 98225	0
CHECKING	3557	15653	02/07/18	25,306.93 Supplier	UNITES STATES TREASURY	INTERNAL REVENUE SERVICE	PO BOX 7122	0
CHECKING	3557	15726	03/14/18	27,435.35 Supplier	UNITES STATES TREASURY	INTERNAL REVENUE SERVICE	PO BOX 7122	0
CHECKING	3557	15703	02/28/18	28,547.91 Supplier	UNITES STATES TREASURY	INTERNAL REVENUE SERVICE	PO BOX 7122	0
CHECKING	3557	15709	03/07/18	29,005.42 Supplier	UNITES STATES TREASURY	INTERNAL REVENUE SERVICE	PO BOX 7122	0
CHECKING	3557	15741	03/21/18	30,034.63 Supplier	UNITES STATES TREASURY	INTERNAL REVENUE SERVICE	PO BOX 7122	0
CHECKING	3557	15665	02/14/18	32,665.76 Supplier	UNITES STATES TREASURY	INTERNAL REVENUE SERVICE	PO BOX 7122	0
CHECKING	3557	15684	02/21/18	32,993.19 Supplier	UNITES STATES TREASURY	INTERNAL REVENUE SERVICE	PO BOX 7122	0
CHECKING	3557	15639	01/31/18	34,389.06 Supplier	UNITES STATES TREASURY	INTERNAL REVENUE SERVICE	PO BOX 7122	0
CHECKING	3557	15591	01/10/18	36,205.54 Supplier	UNITES STATES TREASURY	INTERNAL REVENUE SERVICE	PO BOX 7122	0
CHECKING	3557	15608	01/17/18	37,123.86 Supplier	UNITES STATES TREASURY	INTERNAL REVENUE SERVICE	PO BOX 7122	0
CHECKING	3557	15640	01/31/18	40,744.46 Supplier	UNITES STATES TREASURY	INTERNAL REVENUE SERVICE	PO BOX 7122	0
CHECKING	3557	15566	12/28/17	45,123.18 Supplier	UNITES STATES TREASURY	INTERNAL REVENUE SERVICE	PO BOX 7122	0
CHECKING	3557	15746	03/28/18	45,305.30 Supplier	UNITES STATES TREASURY	INTERNAL REVENUE SERVICE	PO BOX 7122	0
CHECKING	3557	15617	01/24/18	46,628.64 Supplier	UNITES STATES TREASURY	INTERNAL REVENUE SERVICE	PO BOX 7122	0
CHECKING	3557	15576	01/04/18	47,401.03 Supplier	UNITES STATES TREASURY	INTERNAL REVENUE SERVICE	PO BOX 7122	0
CHECKING	3557	15641	01/31/18	21,421.54 Supplier	WA EMPLOYMENT SECURITY DEPT			0
CHECKING	3557	15593	01/08/18	10,000.00 Supplier	WASHINGTON FEDERAL			0
CHECKING	3557	15594	01/03/18	10,000.00 Supplier	WASHINGTON FEDERAL			0
CHECKING	3557	15625	01/11/18	10,000.00 Supplier	WASHINGTON FEDERAL			0
CHECKING	3557	15718	03/08/18	10,296.81 Supplier	WASHINGTON FEDERAL			0
CHECKING	3557	15694	02/22/18	10,888.51 Supplier	WASHINGTON FEDERAL			0
CHECKING	3557	15685	02/15/18	11,154.86 Supplier	WASHINGTON FEDERAL			0
CHECKING	3557	15651	01/26/18	12,077.11 Supplier	WASHINGTON FEDERAL			0
CHECKING	3557	15618	01/18/18	15,000.00 Supplier	WASHINGTON FEDERAL			0
CHECKING	3557	15654	02/03/18	19,420.79 Supplier	WASHINGTON FEDERAL			0
CHECKING	3557	15668	02/15/18	8,006.26 Supplier	WESTERN METAL INDUSTRY PENSION	PO BOX 23159	SEATTLE, WA 98102-0459	0
CHECKING	3557	15731	03/15/18	11,071.02 Supplier	WESTERN METAL INDUSTRY PENSION	PO BOX 23159	SEATTLE, WA 98102-0459	0
CHECKING	3557	15600	01/15/18	14,083.70 Supplier	WESTERN METAL INDUSTRY PENSION	PO BOX 23159	SEATTLE, WA 98102-0459	0
CHECKING	3557	15730	03/15/18	27,176.13 Supplier	WESTERN METAL INDUSTRY PENSION	PO BOX 23159	SEATTLE, WA 98102-0459	0
CHECKING	3557	15667	02/15/18	38,850.38 Supplier	WESTERN METAL INDUSTRY PENSION	PO BOX 23159	SEATTLE, WA 98102-0459	0
CHECKING	3557	15601	01/15/18	49,372.45 Supplier	WESTERN METAL INDUSTRY PENSION	PO BOX 23159	SEATTLE, WA 98102-0459	0

United States Bankruptcy Court
Western District of Washington

In re **Puglia Engineering Inc.**

Debtor(s)

Case No. **18-41324**Chapter **11**

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S) - AMENDED

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	125,753.48
Prior to the filing of this statement I have received	\$	125,753.48
Balance Due	\$	0.00

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

Preparation of a plan and disclosure statement and negotiations with creditors regarding the same.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

April 17, 2018

Date

/s/ James L. Day

James L. Day

Signature of Attorney

Bush Kornfeld LLP

601 Union St., Suite 5000

Seattle, WA 98101-2373

(206) 292-2110 Fax: (206) 292-2104

jday@bskd.com

Name of law firm

**United States Bankruptcy Court
Western District of Washington**

In re **Puglia Engineering Inc.**

Debtor(s)

Case No. **18-41324**

Chapter **11**

LIST OF EQUITY SECURITY HOLDERS - AMENDED

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Neil Turney 2216 East 11th Street Tacoma, WA 98421			100%

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **President** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date **April 17, 2018**

Signature **/s/ Neil Turney**
Neil Turney

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.*

**United States Bankruptcy Court
Western District of Washington**

In re **Puglia Engineering Inc.**

Debtor(s)

Case No. **18-41324**

Chapter **11**

VERIFICATION OF CREDITOR MATRIX - AMENDED

I, the President of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **April 17, 2018**

/s/ Neil Turney

Neil Turney/President

Signer/Title

**United States Bankruptcy Court
Western District of Washington**

In re **Puglia Engineering Inc.**

Debtor(s)

Case No. **18-41324**

Chapter **11**

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1) - AMENDED

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Puglia Engineering Inc.** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [*Check if applicable*]

April 17, 2018

Date

/s/ James L. Day

James L. Day

Signature of Attorney or Litigant
Counsel for **Puglia Engineering Inc.**

Bush Kornfeld LLP

601 Union St., Suite 5000

Seattle, WA 98101-2373

(206) 292-2110 Fax: (206) 292-2104

jday@bskd.com